

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Seminole Building
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G98546** (6)

1. Corporation Name

FIRST LINE FILMS PRODUCTION CO.



Principal Place of Business

**12515 NORTH KENDALL DRIVE
SUITE 314
MIAMI FL 33186**

Main Address

**12515 NORTH KENDALL DRIVE
SUITE 314
MIAMI FL 33186**

2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Zip

Country

Country

24

29

30

g. Name and Address of Current Registered Agent

**CAPUTO, GEORGE
210 SAN LORENZO AVENUE
CORAL GABLES, FL**

**4701 SW-75 Ave.
Miami - Fla. 33155**

81 Name

82 Street Address, P.O. Box Number, or Mailing Address

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.01 and 607.02, Florida Statutes, the above named corporation, hereby this statement for the purpose of changing its registered office or registered agent, both in the State of Florida, has changed, as authorized by the corporation's board of directors, thereby, subject to the appointment as registered agent of an individual, and accept the obligation of Sections 607.01 and 607.02, Florida Statutes.

SIGNATURE

12

OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

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CITY, STATE, ZIP

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STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

13

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY, STATE, ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY, STATE, ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY, STATE, ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY, STATE, ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY, STATE, ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY, STATE, ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY, STATE, ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY, STATE, ZIP

33. TITLE

34. NAME

SIGNATURE: **CAPUTO, GEORGE**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/96

CR2E034 (12/95)