


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # H77671 (6) 1. Corporation Name CINEVISION CORPORATION		



Principal Place of Business 616 E STREET CLEARWATER FL 34616	Mailing Address 616 E STREET CLEARWATER FL 34616
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 616 E Street Suite, Apt. #, etc. 22		2a. Mailing Address 26 616 E Street Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 09/24/1985	
City & State 23 Clearwater, FL Zip 24 33756		City & State 28 Clearwater, FL Zip 29 33756		4. FEI Number 59-2652353 Applied For <input type="checkbox"/> Not Applicable	
Country 25 USA		Country 30 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GUTHRIE, J. MARVIN 1230 S. MYRTLE AVENUE SUITE 101 CLEARWATER FL 34616				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City Clearwater FL 85 Zip Code 33756	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	<input type="checkbox"/> DELETE		1.1 TITLE	P/D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MURRAY, ROGER			1.2 NAME	Murray, Roger		
STREET ADDRESS	616 'E' STREET			1.3 STREET ADDRESS	1420 Morrow Drive		
CITY-ST-ZIP	CLEARWATER FL			1.4 CITY-ST-ZIP	Clearwater, FL 33756		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	D	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	CROWN, WILLIAM E III			2.2 NAME	Crown, William E. III		
STREET ADDRESS	409 PALMETTO RD.			2.3 STREET ADDRESS	409 Palmetto Road		
CITY-ST-ZIP	BELLEAIR FL			2.4 CITY-ST-ZIP	Belleair, FL 33756		
TITLE	D	<input checked="" type="checkbox"/> DELETE		3.1 TITLE	T/D	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	PANAGAKOS, GEORGE			3.2 NAME	Murray, Mary Lou		
STREET ADDRESS	3530 SHORELINE CIRCLE			3.3 STREET ADDRESS	1420 Morrow Drive		
CITY-ST-ZIP	PALM HARBOR FL			3.4 CITY-ST-ZIP	Clearwater, FL 33756		
TITLE	D	<input checked="" type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	DUVOISIN, JAN			4.2 NAME			
STREET ADDRESS	1801 COUNTRY LANE			4.3 STREET ADDRESS			
CITY-ST-ZIP	PALM HARBOR FL			4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, on an attachment with an address.

SIGNATURE _____

[Signature]

1/28/98

812-443-4000

CR2E034 (10/97)