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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

## **FILED** May 12 1998 8:00am Secretary of State

UCEAN	EXPU PHODUCTIONS INC.				
Principal Place	e of Business	Mailing Address		-{	RIC BIRGII ONDIN ONDIN ONDIN NODI
2233 KEYSTONE BLVD 2233 KEYSTONE BLVD					
MIAMI FL 3311		MIAMI FL 33181-2451		DO NOT MIDITE IN THE	C CDACE
				DO NOT WRITE IN THI  3. Date Incorporated or Qualified	3 SPACE
				01/06/1987	
2. Principal P	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 3389	SHERIDAN STREET	26 3389 5HERI	DAN STALET	59-2767765	Not Applicable
Sulte, Apt.		Suite, Apt. #, etc.	<u></u>	5. Certificate of Status Desired	\$8.75 Additional
22	<u> </u>	27 14		5. Cermicate of Status Desired	Fee Required
Clty & State	· • • • • • • • • • • • • • • • • • • •	City & State  28 HOLLYWOOD	G.	6. Election Campaign Financing	\$5.00 May Be
7in	YW 000 TV	Zip / OLYWOOD	Country	Trust Fund Contribution	Added to Fees
24 73	9. Name and Address of Current	29 33021 3	o Browno	8. This corporation owes or has paid the c Personal Property Tax due June 30.      10. Name and Address of New Registere	Yes 🛮 No
PAY	/ETTE, JAMES J.		B1 Name D	DILLES SUCAN M	
ANA MENATONE BUYO				ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33181-2451			Sireer Addition	3 N. GI TERLACE	#1
			83		
			84 City 1		L 85 Zip Code 33 02-4
			'	follywood F	
11. Pursuant to the provisions of Sections 607 0002 and 607.1508, Florida Statutes, the above-named corporation sulmits this statement for the purpose of changing its registered office or registered agent, or holy 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 lamiliar with, and possible the college of Section 607.0505, Florida Statutes.					
agent. I am familiar with. and goffint the policeations of Section 607.0505, Florida Statutes.					
SIGNATURE Signature Spector pure 3 hard to respect your and to be applicable. (NOE. Registered Agent signature required when reliastating).  OATE					
12.	OFFICE AS AND		13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PAYETTE, JAMES J.	•	1.2 NAME		
STREET ADDRESS	2233 KEYSTONE BLVD		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL		1.4 CtTY - ST - ZiP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	PAYETTE, SUSAN M.		2 2 NAME		
STREET ADDRESS	2233 KEYSTONE BLVD		2 3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL	DELETE	2. 4 CITY - ST - ZIP		Characa D Addition
TITLE	*	☐ DELETE	3.1 TITLE		L. Change L. Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY-ST-ZIP 4.1 TiTLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<del></del>	·····	5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP	positive that the information American is	this files does not make to	64 CITY - S1 - ZIP	Continu 440 07(0)(i) Florida Continu 14 0	andifuther the left
in, interecty o	orany mantine informatioprsjappined will	or unis ming does not quality for	me exemption stated in :	Section 119.07(3)(i), Florida Statutes, I further	Certify that the information [

Indicated on this annual report of supplemental annual report is frue 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 changing or on an attachment with an address.