FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APR FILED
95 MAR 13 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J61814 (6)

1. Corporation Name
MORNING STAR TELEVISION PRODUCTION, INC.

Principal Place of Business	Mailing Address
% KENNETH W. SMITH 7226 W. COLONIAL DR., S-224 ORLANDO, FL 32818 US	% KENNETH W. SMITH 7226 W. COLONIAL DR., S-224 ORLANDO, FL 32818 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/09/1987
3a. Date of Last Report: 02/07/1994

2. Principal Place of Business
21: 9427 Lake Lotta Cir.
22: Suite, Apt. #, etc.
23: City & State: Gotha, Florida
24: Zip: 34734
25: Country: US

2a. Mailing Address
26: 9427 Lake Lotta Cir.
27: Suite, Apt. #, etc.
28: City & State: Gotha, Florida
29: Zip: 34734
30: Country: US

4. FEI Number: NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SMITH, KENNETH W.
7226 W. COLONIAL DR.
S-224
ORLANDO, FL 32818

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 9427 Lake Lotta Cir.
83
84 City: Gotha, FL 85 Zip Code: 34734

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: Diana J. Smith
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☒ Change ☐ Addition
NAME	SMITH, KENNETH W.	1.2 NAME	
STREET ADDRESS	7226 W. COLONIAL DR., S-224	1.3 STREET ADDRESS	9427 Lake Lotta Circle
CITY-ST-ZIP	ORLANDO, FL	1.4 CITY-ST-ZIP	Gotha, Florida 34734
TITLE	SD	2.1 TITLE	☒ Change ☐ Addition
NAME	SMITH, DIANA J.	2.2 NAME	
STREET ADDRESS	7226 W. COLONIAL DR., S-224	2.3 STREET ADDRESS	9427 Lake Lotta Circle
CITY-ST-ZIP	ORLANDO, FL	2.4 CITY-ST-ZIP	Gotha, Florida 34734
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	200001420432 -03/15/95--01077--007 ****200.00 ****200.00
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	3/15/95 MSH
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, or on an attachment with an address.

SIGNATURE: Diana J. Smith Diana J. Smith 3-6-95 407-297-9048
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #

0060054 CP