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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harjo
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K 53249 ✓

1. Corporation Name

SHIPRA CORPORATION
DBA MAGIC VIDEO

Principal Place of Business

1900 BUENA VISTA DR.
LAKE BUENA VISTA
FL 32830

Mailing Address

1900 BUENA VISTA DR.
LAKE BUENA VISTA
FL 32830

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/22/1988

4. FEI Number

59-2993172

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees

Trust Fund Contribution

8. This corporation owes the current year intangible
Personal Property Tax.☐Yes ☐ No

2. Principal Place of Business

11. Suite, Apt. #, etc.

12. City & State

13. Zip

Country

25. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

Country

29. Country

9. Name and Address of Current Registered Agent

SOLANKY, NEIL ALFRED
7901 GOLDFEAT ST.
ORLANDO FL 32835

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83. City

84. State

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature, typed or block print of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

06/25/99

12. OFFICERS AND DIRECTORS

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1.5 CITY-STATE-ZIP

1.6 CITY-STATE-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

1.5 CITY-STATE-ZIP

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SIGNATURE:

NEIL A. SOLANKY

06/25/99 (401) 827-6056

SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRZED34 (11/98)

July 17th 1999

Florida Department of Revenue
Division of Corporations
P.O. Box 6327
TAUATASSEE, FL 32314

Attention: Mr Sean Toner

Dear Sir,

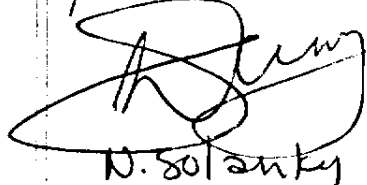
Ref Number K 53249 / Corp Annual Report

I refer to the letter from Florida Dept of Revenue of 07/4/99.
On contacting their offices I was directed to re-submit
the Report form marked to Mr S. Toner's attention.

As explained previously the original forms were not
received due to change of location of Shipra Corp and
mailing address. We were informed that since the forms
were not received, penalty charges would be waived.

Enclosed are copies of correspondence and copy of the
Annual Report Form for your further action.

Yours Sincerely



N. Solanky

Shipra Corp.

1900, BUENA VISTA DR
LAKE BUENA VISTA
FL 32830

ENCL: