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PROFIT CORPORATION ANNUAL REPORT

1999

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG -2 AM 10:50

DOCUMENT # K53249

1. Corporation Name
SHIPRA CORPORATION
DBA MAGIC VIDEO

Principal Place of Business	Mailing Address
1900 BUENA VISTA DR. LAKE BUENA VISTA FL 32830	1900 BUENA VISTA DR. LAKE BUENA VISTA FL 32830

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified: 12/22/1988	
11	26 c/o N. Solanky	4. FEI Number: 59-2993172	Applied For / Not Applicable
Suite, Apt. #, etc. 12	Suite, Apt. #, etc. 27 7901 GOLDLEAF ST.	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
City & State 13	City & State 28 ORLANDO	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 14 / Country 25	Zip 29 FL 32835 / Country 30 USA	8. This corporation owes the current year Intangible Personal Property Tax.	☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SOLANKY, NEIL ALFRED 7901 GOLDLEAF ST. ORLANDO FL 32835	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 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 607.0505, Florida Statutes.

SIGNATURE: [signature] DATE: 06/25/99
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TLE	DP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
ME	SOLANKY, NEIL ALFRED	1.2 NAME	
REET ADDRESS	7901 GOLDLEAF ST.	1.3 STREET ADDRESS	
TY-ST-ZIP	ORLANDO, FL 32835	1.4 CITY-ST-ZIP	
ILE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
ME		2.2 NAME	
REET ADDRESS		2.3 STREET ADDRESS	
Y-ST-ZIP		2.4 CITY-ST-ZIP	
LE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
ME		3.2 NAME	
REET ADDRESS		3.3 STREET ADDRESS	
Y-ST-ZIP		3.4 CITY-ST-ZIP	
E	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
E		4.2 NAME	
EET ADDRESS		4.3 STREET ADDRESS	
-ST-ZIP		4.4 CITY-ST-ZIP	
E	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
E		5.2 NAME	
EET ADDRESS		5.3 STREET ADDRESS	
ST-ZIP		5.4 CITY-ST-ZIP	
E	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
E		6.2 NAME	
ET ADDRESS		6.3 STREET ADDRESS	
ST-ZIP		6.4 CITY-ST-ZIP	

$8/8/2

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, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] NEIL A. SOLANKY 06/25/99 (407)827-6056
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #

CR2E034 (11/98)

July 17th 1999

Florida Department of Revenue
Division of Corporations
P.O. Box 6327
TALLAHASSEY, 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 07/9/99. On contacting their offices I was directed to re-submit the Report form marked to Mr S. Toners 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, penelty charges would be waivered Enclosed are copies of correspondence and copy of the Anual Report Form for your furthure action
Yours Sincerly

N. Solanky
Shipra Corp.
1900, BUENA VISTA Dr
LAKE BUENA VISTA
FL 32830
ENCL: