SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # L06059

(4)

PARIS PRODUCTIONS, INC.

•

Mailing Address

S JACK L. WEITZMAN FSO

FILED Aug 18 1997 8:00am Secretary of State



% JACK L. WEITZMAN ESO 11555 S.W. B2ND AVE. MIAMI FL 33156			11	% JACK L. WEITZMAN ESQ 11555 S.W. 82ND AVE. MIAMI FL 33156				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report				
								07/31/1989	06/20			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		<u> </u>	oplied For	
21				26				65-0154004			ot Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desired Section Secti				
City & State				City & State				6. Election Campaign Financing	!	\$5.00	May Be	
23				28				Trust Fund Contribution				
Zip		Country		Zip Cour				8. This corporation owes or has paid the current year Intangible				
24	25 29 30				30	Personal Property Tax due June 30. 🔀 Yes 🔲 No] No	
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
VAN	n Caemeri	BEKE, RIPKA				81	Name					
11555 S W 82 AVE				82 Sireet Add			Street Ar	ddress (P.O. Box Number is Not Acceptable)				
MIAMI FL 33156							Olfoot Ac	Audition (1.2. Dox Hullion is Not Acceptable)				
						В3						
						84	City		FL 8	1 '	Code	
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 Signature, typed or printed name of registered agent and title if applicable (NOTE Regis							il signature re	quired when reinstaling)	DATE			
12.		OFFICERS A	ND DIREC	TORS	13.	••••		ADDITIONS/CHANGES TO OFFICE	ERS AND DIF	RECTOR	RS IN 12	
TITLE	PSD	*		DELETE	1.1 ग्रा	LE				Change	Addition	
NAME	RIPKA, N	MARIE-ANGE			1.2 NAI	ME					-	
STREET ADDRESS		.W. 82ND AVE		1.3 \$		1.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FI	L			1.4 CIT	Y-SI	- 7(P				;	
TITLE	VTD			DELETE	2.1 7(1)					Change	Addition	
NAME	VAN CAEMERBEKE, JEAN			22		2.2 NAME			_	•		
STREET ADDRESS		.W. 82ND AVE.					ADDRESS				1	
CITY-ST-ZIP	MIAMI FL										1	
TITLE				☐ DELETE	2.4 CIT		1-21/			Change	☐ Addition	
NAME				3.21			i		_	onange.		
STREET ADDRESS							ADDRESS					
											İ	
CITY-ST-ZIP				DELETE	3.4. CIT		1-211			Change	☐ Addition	
TITLE				L. DELETE	4.1 1110		1			onange	LJ AUGIIION	
NAME STREET ADDRESS					4.2 NA		ADDRESS					
1							į.				[
CITY-ST-ZIP TITLE				DELETE	4.4 CIT		- ZIP			Change	Addition	
ſ				beech	5.1 IIII				لــا	αn y σ	Radillon	
NAME STREET ADDRESS	ļ. .						ADDRESS				i	
											- 1	
CITY-ST-ZIP TITLE				☐ DELETE	5.4 CIT		- 219			Change	Addition	
				□ occeit						CHAILAG	LL MUUUUM	
NAME					6.2 NAM		i				[
STREET ADDRESS							ADDRESS				j	
CITY-ST-ZIP					6.4 CIT	Y-ST	- ZIP					

14. I do 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 Barra 13 methanged, or on an attachment with an address.