F 11 1	NOW, FILING FEE	AFTED MAY 4 10	A005 00		
PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # L43238 (9)					
	PRODUCTION SERVICES, II	IC.			
7107 1	mobborion ocimioco; n	10.			
Principal Place	of Business	Muling Address			
1140 S RIO GRANDE AVE ORLANDO FL 32805 US ORLANDO FL 32805 US ORLANDO FL 32801					
00		US		3. Date Incorporated or Qualific 01/12/1990	od 3a. Date of Last Report 04/04/1995
2. Principal Pla	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
Suite, Apt. 1	#, etc.	26		59-2987935 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State		City & State		6. Election Campaign Financin	Fee Required
23		28		Trust Fund Contribution	Added to Fees
Ζρ 24	Gountry 25	2ip 29	Country 30		for intangible tax under s. 199.032, Yes. 🔲 No
	g. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of Ne	w Registered Agent
A.G.C.	. CO.			Address (P.O. Box Number is Not Accep	stable)
	ORANGE AVENUE		83	Address II . C. Box Marines 13 Not Accep	ACHOIC!
, SUITE ORLAI	2300 NDO FL 32801				
	- -		84 City		FL 85 Zip Code
or registere	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric h, and accept the obligations of, Secti	tal Such change was authorized	the above named or by the corporation's	orporation submits this statement for the a hoard of directors, I hereby accept the a	purpose of changing its registered office appointment as registered agent. I am
SIGNATURE _					
12.	Signature: typed or perded name of registration age of OFFICERS AND		Big Gered Agent signature 13.		DEFICERS AND DIRECTORS IN 12
TITLE	D	□ DELFTE	1 1 11111	D/P/S	Change Addition
NAME STREET ADDRESS	SMITH, JANET 2232 CONIFER AVE		1.2 NAME		
CITY-ST-ZIP	WINTER PARK FL		1.3 STREET ADDRESS 1.4 City - \$1 - ZiP		
TITLE	D	☐ DELETE	2 1 Till. E	D/P/T	Change Addition
NAME DECEST ADDRESS	SMITH, DENNIS 2232 CONIFER AVE		22 NAME		
STREET ADDRESS CITY - S1 - 2IP	WINTER PARK FL		2.3 STREET ACDRESS 2.4 CITY - ST - ZIP		
TITLE		DELETE	3 * TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	3.4 CiTy - ST - 7 P		
NAME		D DECEIE	4 1 TITLE 4 2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CrT x - ST - ZIP		-
TITLÉ		☐ DELETE	5 1116	500001 -04/29/960	SS 2 To Change Addition
NAME CIPECT ADDRESS			5 2 NAME	***200.00	103477023
STREET ADDRESS CITY+ST-ZIP		,	5.3 STPEET ADDRESS 5.4 CITY - ST - ZIP	***************************************	
TITLE	YOUND TO SEE THE SECOND	DELETE	6 1 1/fLE		Change Addition
NAME		4	6.2 NAME		068

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)(ki). 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 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE SIGNATURE OF SIGNING OFFICER OR DIRECTOR

4/3/96 407-422-4387

CR2E034 (12/95)