FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L68

L68686

(9)

Mailing Address

GEPLEN PRODUCTIONS INCORPORATED

FILED Feb 20 1998 8:00am Secretary of State



18274 CLEAR 2D BOCA RATOR US	RBROOK CIRCLE N FL 33498	18274 CLEARBROOK CIRCLE 621 GARDENS DR BOCA RATON FL 33498 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/26/1990				
	Place of Business	2a. Mailing Address				4. FEI Number		Applied For	
₂₁ 18274	Clear Brook Cire	cla 18274 Clear	Bro	ook C	ir.	65-0188133		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	 			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State						6. Election Campaign Financing	\$5.0	00 May Be	
23 Boca Raton, Fl. 28 Boca Rator						Trust Fund Contribution		ed to Fees	
□ 33466 □ ······· □			_ Countr	У		8. This corporation owes or has pai	d the current year	Intangible	
24 33498 25 USA 29 33498 30 USA Personal Property Tax due June 30. XYes \(\text{No} \) No								∐ No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
	ISCI, NELLO A.		81 Name						
187	274 CLEAR BROOK CIR	82 Street Addre			Addres	ess (P.O. Box Number is Not Acceptable)			
						· · · · · · · · · · · · · · · · · · ·			
BOCA RATON FL 33498			83	"					
			84	City			FL 85 Z	Ip 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 NELLO A: MSC I Signature, tyried or printed name of legistered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE									
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12	
TITLE			1.1 TITLE				☐ Chanç	ge L Addition	
NAME	MASCI, NELLO A.		1.2 NAME						
STREET ADDRESS	18274 CLEAR BROOK CIR		1.3 STREE	T ADDRESS					
CITY-ST-ZIP	T ::::::		1.4 CITY+	ST-ZIP					
TITLE		☐ DELETE	2.1 TITLE	l		•	☐ Chang	e LAddition	
NAME				2.2 NAME					
STREET ADDRESS	■ ·		2.3 STREE	T ADDRESS					
CITY-ST-ZIP			2 4 CITY-	ST - ZIP					
TITLE			31 TITLE				☐ Chang	ge [_] Addition	
NAME			3.2 NAME	ļ					
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP		DELE TE	3.4. CITY-	ST - ZIP			T Ober	42.00	
TITLE		ריין הכרכוב	4.1 TITLE				L Chang	ge ∐ Addition	
NAME STORET ADDRESS			4. 2 NAME						
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP TITLE		☐ DELET E	4.4 CITY - 5.1 TITLE	or ZIP			Chang	je Addition	
NAME		Decerts	5.2 NAME				Jilang	Auditoti	
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP									
TITLE	-	DELE TE	5.4 CITY-: 6.1 TITLE	01 ~ LIF			☐ Chang	je 🔲 Addition	
NAME		mod =	6.2 NAME						
STREET ADDRESS			6.3 STREET	I VUUBEGG					
CITY-ST-ZIP			6.4 CITY - :					- !	
14. Thereby o	ertify that the information supplied wi	th this filing does not qualify for the	ne exemp	tion stated	d in Se	ction 119.07(3)(i), Florida Statutes. I fe	urther certify that t	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 eath, 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.									