

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
---	--

DOCUMENT # L93577 (9)

1. Corporation Name
FEST PRODUCTIONS, INC.

Principal Place of Business 1763 EAGLE RIDGE BLVD. PALM HARBOR FL 34685 US	Mailing Address 1763 EAGLE RIDGE BLVD PALM HARBOR FL 34685 US
--	---

2. Principal Place of Business 21 State: FL	2a. Mailing Address 26 State: FL
22 City & State:	27 City & State:
23 County:	28 County:

9. Name and Address of Current Registered Agent

**FEST, LILI G.
1763 EAGLE RIDGE BLVD.
PALM HARBOR FL 34684**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/25/1990	3a. Date of Last Report 06/03/1994
4. FEI Number 59-3023459	Applied for ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for income tax under S 1361B Florida Statutes ☒ Yes ☐ No	

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Numbers Not Acceptable):
83
84 City:
85 Zip Code:

11. Pursuant to the provisions of Sections 607.01(1) 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 understand the obligations of Section 607.01(1), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN '95	
OFFICE NAME STREET ADDRESS CITY & STATE	P FEST, MANFREDO 1763 EAGLE RIDGE BLVD PALM HARBOR FL	1. TITLE 2. NAME 3. STREET ADDRESS 4. CITY & STATE	☐ Change ☐ Addition
OFFICE NAME STREET ADDRESS CITY & STATE	VP FEST, PHILLIP 1763 EAGLE RIDGE PALM HARBOR FL	5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY & STATE	☐ Change ☐ Addition
OFFICE NAME STREET ADDRESS CITY & STATE	ST FEST, LILI C 1763 EAGLE RIDGE PALM HARBOR FL	9. TITLE 10. NAME 11. STREET ADDRESS 12. CITY & STATE	☐ Change ☐ Addition
OFFICE NAME STREET ADDRESS CITY & STATE		13. TITLE 14. NAME 15. STREET ADDRESS 16. CITY & STATE	☐ Change ☐ Addition
OFFICE NAME STREET ADDRESS CITY & STATE		17. TITLE 18. NAME 19. STREET ADDRESS 20. CITY & STATE	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and true; that equally for the foregoing stated in Sections 607.01(1) and 607.1508, Florida Statutes, I have verified that the information included on this annual report or biennial report is true and accurate and that my corporation shall have the same legal effect as if it were so verified. That this affidavit is in compliance with the provisions of the revision of Florida's corporation laws and that my corporation shall have the same legal effect as if it were so verified. That this affidavit is in compliance with the provisions of the revision of Florida's corporation laws and that my corporation shall have the same legal effect as if it were so verified. That this affidavit is in compliance with the provisions of the revision of Florida's corporation laws and that my corporation shall have the same legal effect as if it were so verified.

SIGNATURE: *Lili G. Fest* - Secretary **4-26-1995**

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR