_	and File on or before 8 NOTICE: will be dissolved.	ept. 29, 199	99 or Limited Lia	bility Company	,	
LIMITE	D LIABILITY COMPANY ANNUAL REPORT 1999		LORIDA DEPARTN Katherine Secretary o DIVISION OF COR	Harris of State RPORATIONS	00 111 19	ED 26 AM 9:46 7/23
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee \$ 588.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE						PARTICIPATION //22
1 Name		# L95000000290		TÄLLÄHE		
CAM FILM WORKS, L.C. 21218 ST. ANDREWS BLVD. BOCA RATON FL 33433					1a. Principal Place of Business Address 21218 ST. ANDREWS BLVD. BOCA RATON FL 33433	
2 Principal Place of Business 2a. Maili			ing Address		3. Date Organized or Qualified 3a. State of Formation	
Suite, Apt. #, etc. S			t. #, etc.		04/12/1995 FL 4. FEI Number	
City & State Zio Country			Criy & State		65-0725077 Not Applicable 5. Date of Last Report 5. Certificate of Status Desired	
Zip	Country	Ζίρ	Cour	iiry	04/13/1	S8 /5 Additional Fee Required
NAPARSTEK, MICHAEL 9257 RAMBLEWOOD DRIVE APT. 1312 CORAL SPRINGS FL 33065 Ply ORAL APT & Code 33133 9. Pursuant to the provisions of Sections 608 416 and 608-508, Elonide Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE 7-16-99 DATE DATE						
10. Title	Managing Members/Managers		Business Street Address		City, State and Zip Code	
MGR	CLARIN, INC.	22296 COLLINGTON DRIVE		BOCA RATON FL		
MGR	JAG, INC.	90 EDGEWATER DRIVE, #1119		CORAL GABLES FL		
MGR	JAMATT HOLDING (9784 ROYAL PALM BLVD.		CORAL SPRINGS FL		
į					5 :0	10002950535E -08/04/9901072006 ****588.75 ****588.75
11 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. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.						
SIGNATURE: 1-16-99 305-666-898/ SUMPLIFICATION OF SIGNING MANAGING MEMBER OF MANAGER NELSET OF 16-799) NELSET OF 16-799						

INHSE10 R (6/99)