PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name

MIAMI PICTURE AND SOUND COMPANY, INC.

Principal Place of Business	Mailing Address	
4969 S.W. 74TH COURT MIAMI FL 33155-4471	4969 S.W. 74TH COURT MIAMI FL 33155-4471	

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90189 002 ***150.00



DO NOT WRITE IN THIS SPACE

ADER, ROBERT 1010 CITY NATIONAL BANK BLDG. MIAMI FL 33130 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 84 City FL 85 Zip Code 85 Zip Code 86 City FL 87 Zip Code 87 Zip Code 88 Zip Code 89 Zip Code 80 Zip Code 81 Zip Code 82 Zip Code 83 Zip Code 84 Zip Code 85 Zip Code 86 Zip Code 86 Zip Code 87 Zip Code 87 Zip Code 88 Zip Code 88 Zip Code 89 Zip Code 80 Zip Code							3. Date Incorporated or Qualifed 10/29/1985			
Suito, Apil. 6, otc. 21 City & Statue 22 City & Statue 23 Zip Country 29 Zip Country 29 Zip Country 30 30 30 30 30 30 30 30 30 30 30 30 30	2. Principal Place of Business 2a. Mailing Address							A	pplied For	
Sulto, Apt. 9, etc. Sulto, Apt. 9, etc.	¬ '						59-2594461		lot Applicable	
City & State 28	Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired			
28 Country Zip Country Zip Country 8. This corporation were the current year intangelie Personal Property Tax. Yes No.							6. Flection Campaign Financing	\$5:00	May Be	
Zip Country Zip Country Zip Country 8. This corporation owes the current year intangible Personal Property Tax	─ '	-	<u>⊢</u> , ′	-			-1		•	
9. Name and Address of Current Registered Agent ADER, ROBERT 1010 CITY NATIONAL BANK BLDG. MIAMI FL 33130 82 Street Address (P.O. Box Number is Not Acceptable) 83 Sagent in 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. I am minimal with, and accept the obligations of, Section 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-51-72P MAMI FL 15. TITLE OFFICERS AND DIRECTORS 16. STURM, AVIN 17. STURM, AVIN 18. STURM, AVIN 18. STURM, AVIN 19. DELETE 21. TITLE 18. CATY-51-72P 19. DELETE 21. TITLE 19. Change Addition Addition AMME 14. CITY-51-72P 15. TITLE 15. TITLE 16. Change Addition Addition Addition Addition Addition AMME 15. Name 16. STIRET ADDRESS CITY-51-72P 17. Change Addition Addition ADDRESS CITY-51-72P 17. Change Addition Addition ADDRESS CITY-51-72P ADDRESS CITY-51-72P ADDRESS CITY-51-72P ADDRESS CITY-51-72P ADDRESS ACITY-51-72P ADDRESS CITY-51-72P ADDRESS ACITY-51-72P ADD		Country		Coun	tгу		8. This corporation owes the current year Intang	ible		
ADER, ROSERT 1010 CITY NATIONAL BANK BLDG. MIAMI FL 33130 81 Name 42 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florids 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 Florids. Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered—agent. I am final with, and except the obligations of, Section 607,0509, Florids 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 Florids. Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered—agent. I am final mile with, and except the obligation of, 50-ction 67,0509, Florids Statutes, submitted by the corporation's board of directors. I hereby accept the appointment as registered—agent. I am final state of the appointment as registered—agent. I am final state of the appointment as registered. SIGNATURE 91 OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. SIRRET ADDRESS 14. OTV.51.2P 14. OTV.51.2P 14. OTV.51.2P 15. TITLE 16. OTM.51.2P 17. AUGUST TO THE COURT 18. AUGUST TO THE COURT TO THE	24	25	29	30			Personal Property Tax.] Yes	□No	
ADER, ROBERT 1010 CITY NATIONAL BANK BLDG. MIAMI FL 33130 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Floridal 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, alm familiar with, and accept the obligations of, Section 607,0505, Floridal Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE STURM, KURT 12. TITLE STURM, KURT 13. STEET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. STEET ADDRESS 14. CITY ST. 2P 14. CITY ST. 2P 15. TITLE 16. Change Addition 16. Change Addition 17. Change Addition 18. STURM, ANN 21. NAME 32. STEET ADDRESS 18. CUTY ST. 2P 19. TITLE 1		9. Name and Address of Current	Registered Agent	•			10. Name and Address of New Registered Age	ent		
11. Pursuant to line provisions of Sections 607 0502 and 607.1508, Floridal Statutes, the address (P.O. Box Number is Not Acceptable) 11. Pursuant to line provisions of Sections 607 0502 and 607.1508, Floridal Statutes, the address of Floridal				1	81	Name			Ì	
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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 agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby about the appointment as registered—agent, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE					Street Address (P.O. Box Number is Not Acceptable)					
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 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. TITLE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 14. OFFICERS AND DIRECTORS IN 12. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 29. ADDITIONS/CHANGES TO OFF	MAIM	WI FL 33130		1	83					
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12.	office or re agent. I a	egistered agent, or both, in the State o	if Florida. Such change was au	ithorized i	by the	named corpo e corporation	oration submits this statement for the purpose of chan's board of directors. I hereby accept the appointment	anging it nent as i	s registered egistered	
12. OFFICERS AND DIRECTORS	SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered A	vgent si	ignature required	when reinstating) DATE			
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U111-31-21F	STREET ADDRESS									
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4. I 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 Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND THE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.8.99

Ja (66 4 65)

Daytime Phone #

Date