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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M23196

THEATRICAL PRODUCTIONS, INC.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90114 020 ***150.00



1]
Principal Pl	ace of Business	Mailing Address	 -					
308 SE 14TH	I ST	308 SE 14TH ST						. 2,41, 4(31, (44)
308 S.E. 14T	'H STREET	308 S.E. 14TH STREET						
FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316						DO NOT WRITE IN TH	IIC CDACE	
US US						3. Date Incorporated or Qualified	IS SPACE	
						11/12/1985		
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number		
21 26							⊱	pplied For
Suite, Apt. #, etc. Suite, Apt. #, etc.						59-2601518		lot Applicable
22 27						-5Certifcate of Status Desired		Additional
City & State City & State								equired
23 28					-	6. Election Campaign Financing Trust Fund Contribution		May Be
Zip				ntry		Trust Fulla Contribution		to Fees
24	25 29 30			,	This corporation owes the current year			_
9. Name and Address of Current Registered Agent			1301			Personal Property Tax.	☐ Yes	No
				81 Nan	ne	10. Name and Address of New Registere	d Agent	
	an jean ann							
308 SE 14H ST				82 Stre	et Addres	s (P.O. Box Number is Not Acceptable)	· ·	
FT LAUDERDALE FL 33316			-				<u> </u>	
				83				
			l.	84 City			11 -	
44 Durana	4 An Abrah			1 -		Fi		Code
office or agent. I	registered agent, or both, in the St am familiar with, and accept the ob-	.0502 and 607.1508, Florida Statut tate of Florida. Such change was a bligations of, Section 607.0505, Flo	es, the about the state of the	ove-name by the co	ed corpora orporation's	tion submits this statement for the purpose of board of directors. I hereby accept the appointment of the purpose of the statement for the	of changing its	registered gistered
SIGNATURE		gasono oi, ocoson oo7.0303, 110	iida Statut	es.				· · · · ·
	Signature, typed or printed name of registered	egent and title if applicable. (NOTE	: Registered A	gent signatur	re required wh	on coloratations)		
12.		AND DIRECTORS	13.	gorn dignator	o required with	en reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ALD DIDECTO	
TITLE	PTS	☐ DELETE	1.1 TITL			ADDITIONS/CHANGES TO OFFICERS A		
NAME	RYAN, JEAN ANN		1.2 NAM	F			Change	☐ Addition
STREET ADDRESS				EET ADDRES				ļ
CITY-ST-ZIP	FT. LAUDERDALE FL		4		×			
TITLE	D	☐ DELETE	1.4 CITY 2.1 TITLE					
NAME	MESSING, HOWARD		1		ļ	•	☐ Change	☐ Addition
STREET ADDRESS	l		2.2 NAM	_				
CITY-ST-ZIP	FT. LAUDERDALE FL			ETADORES	is			1
TITLE	TT. CAODLIDALE FE	- Determ	2. 4 CITY					,
NAME		☐ DELETE	3.1 TITLE		İ		☐ Change	☐ Addition
i			3.2 NAME	•				
STREET ADDRESS			3.3 STRE	ET ADDRESS	s			1
CITY-ST-ZIP			3.4. CITY	ST-ZIP				}
TITLE		☐ DELETE	4.1 TITLE	-			Change	Addition
NAME			4. 2 NAME	.				
STREET ADDRESS			4.3 STREI	ET ADDRESS	3			
CITY-ST-ZIP		_	4.4 CITY-	ST-7IP				
TITLE		☐ DELETE	5.1 TITLE		+		- Change	
NAME			5.2 NAME				Change	Addition
STREET ADDRESS			5.3 STREE	T ADDRESS	;	••	•	
CITY-ST-ZIP			_		1			
TITLE			5.4 CITY-5	ST-ZIP				
		∏ DELETE	5.4 CITY-5	ST-ZIP	<u> </u>			_ <u></u>
NAME		☐ DELETE	6.1 TITLE				☐ Change	Addition
1		☐ DELETE	6.1 TITLE 6.2 NAME			,	Change	Addition
NAME		☐ DELETE	6.1 TITLE 6.2 NAME	TADDRESS		,	Change	Addition

indicated on this annual report or 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 Block 12 or Block 13 if changed or on an adactment with an address, with all other like empowered.

SIGNATURE:

954-523-6399