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

**PROFIT** CORPORATION ANNUAL REPORT

1999

**DOCUMENT # M24712** 



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90083 026 \*\*\*150.00

MERLIN	MULTIMEDIA CORPORA	ATION					
Principal Plac	e of Business	Mailing Address				######################################	JIBI FIBIL IBBI
711 NW 101 TERRACE 7700 N. KENDALL DR PLANTATION FL 33324 SUITE 905 US MIAMI FL 33156 US				DO NOT WRITE IN	THIS SDACE		
				3. Date Incorporated or Qualifed	INIO SPACE		
		00			12/17/1985		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	plied For
21	¬ ' —				59-2649461	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	<b>\$8.75</b> A Fee Re	
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip		untry	8. This corporation owes the current year		
24	25	29	30	1	Personal Property Tax.		□No
	9. Name and Address of Cu	irrent Registered Agent		81 Name	10. Name and Address of New Registe	ered Agent	
DAV	/IS, LAWRENCE, PA						
9400 SOUTH DADELAND BLVD.				82 Street Addr	ress (P.O. Box Number is Not Acceptable)		
SUITE 110				83		•**	
MIAMI FL 33156-9818				84 City		85 Zip C	ode.
				84 City		FL  °	Jode
office or r agent. I a	registered agent, or both, in the S	State of Florida. Such change was bligations of, Section 607.0505, F	authorize	d by the corporation	oration submits this statement for the purpo on's board of directors. I hereby accept the a	appointment as req	gistered
SIGNATURE	Signature, typed or printed name of registere	d agent and title if applicable. (NOT	E: Registered	Agent signature required			
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
TITLE	DPS	☐ DELETE	1.1 Ti			☐ Change	☐ Addition
NAME ·	YASIN, NORMAN		1.2 N				
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP	PLANTATION FL	☐ DELETE	1.4 C 2.1 Ti	TY-ST-ZIP		Change	Addition
TITLE	YASIN, MIRIAM	ריו סברבור	2.1 II			onlings	
NAME	TAA NIM ANA TERRACE			TREET ADDRESS			
STREET ADDRESS	PLANTATION FL			CITY-ST-ZIP			}
CITY-ST-ZIP TITLE	TEMPLATION	☐ DELETE	3.1 T			Change	Addition
NAME		<b>_</b>	3.2 N	i			_
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP			3.4. 0	CITY-ST-ZIP			j
TITLE		☐ DELETE	4.1 T	TLE		☐ Change	Addition
NAME			4.21	IAME			
STREET ADDRESS			4.3 S	TREET ADDRESS			ĺ
CITY-ST-ZIP	1			1			
			4.4 C	ITY-ST-ZIP			
TITLE	,	☐ DELETE	5.1 T	TLE		☐ Change	Addition
TITLE NAME		☐ DELETE	5.1 TI 5.2 N	TLE AME		☐ Change	☐ Addition
		☐ DELETE	5.1 TI 5.2 N 5.3 S	TLE AME TREET ADDRESS		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			5.1 TI 5.2 N 5.3 S 5.4 C	TLE AME TREET ADDRESS ITY- ST-ZIP			
NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	5.1 TI 5.2 N 5.3 S 5.4 C 6.1 T	TLE  AME  TREET ADDRESS  ITY-ST-ZIP TLE		☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			5.1 TI 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	TLE  AME  TREET ADDRESS  ITY-ST-ZIP TLE			

14. 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 over a afactment with an address, with all other like empowered.

SIGNATURE: