

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.**  
**AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # M56423 (0)**

1. Corporation Name

**MALENA PRODUCTIONS, INC.**



Principal Place of Business

Mailing Address

**4430 NE 25 AVE  
FT LAUDERDALE FL 33308  
US**

**P O BOX 14483  
FT LAUDERDALE FL 33302  
US**

2. Principal Place of Business

2a. Mailing Address

**21 936 Intracoastal Drive**

**26 Suite, Apt. #, etc.**

**22 Ste. 705**

**27 Suite, Apt. #, etc.**

**23 Fort Lauderdale**

**28 City & State**

**24 FL 33304**

**29 Zip**

**25 Country**

**30 Country**

3. Date Incorporated or Qualified

**07/30/1987**

3a. Date of Last Report

**05/01/1995**

4. FEI Number

**65-0003378**

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 intangible tax under s. 199.032 Florida Statutes

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

**STEINER-HORNSTEYN, HELENA  
4430 NE 25 AVE  
FT LAUDERDALE FL 33308**

10. Name and Address of New Registered Agent

**81 Name Helena Steiner-Hornsteyn  
82 Street Address (P.O. Box Number is Not Acceptable) 936 Intracoastal Drive  
83 Ste. 705  
84 City Fort Lauderdale FL 85 Zip Code 33304**

11. Pursuant to the provisions of Sections 607.0102 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

*Helena Steiner-Hornsteyn, Pres. July 30, 1996*

12. OFFICERS AND DIRECTORS

**TITLE PD  
NAME STEINER-HORNSTEYN, H.  
STREET ADDRESS 4430 NE 25 AVE  
CITY-ST-ZIP FT LAUDERDALE FL**

☐ DELETE

**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

☐ DELETE

**TITLE  
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CITY-ST-ZIP**

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**TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP**

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**11 TITLE Helena Steiner-Hornsteyn  
12 NAME Helena Steiner-Hornsteyn  
13 STREET ADDRESS 936 Intracoastal Drive, Ste. 705  
14 CITY-ST-ZIP Ft. Lauderdale, FL 33304**

☒ Change ☐ Addition

**21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP**

☐ Change ☐ Addition

**31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP**

☐ Change ☐ Addition

**41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP**

☐ Change ☐ Addition

**51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP**

☐ Change ☐ Addition

**61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP**

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Helena Steiner-Hornsteyn, Pres. 7/30/96*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Month/Year

CR2E034 (3/96)