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May 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N10737

1. Corporation Name
MIAMI SPRINGS TV PRODUCTIONS INC.

Principal Place of Business 255 WESTWARD DRIVE MIAMI SPRINGS FL 33166	Mailing Address 4580 N JEFFERSON AVE MIAMI BEACH FL 33400-2938
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2. Principal Place of Business 21 255 WESTWARD DRIVE Suite, Apt. #, etc. 22 E City & State 23 MIAMI SPRINGS FL Zip 24 33166	2a. Mailing Address 26 4580 N JEFFERSON AVE Suite, Apt. #, etc. 27 City & State 28 MIAMI BEACH FL Zip 29 33400-2938
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9. Name and Address of Current Registered Agent J. Asmundsson 4580 N JEFFERSON AVE	10. Name and Address of New Registered Agent 81 Name JO ASMUNDSSON 82 Street Address (P.O. Box Number is Not Acceptable) 4580 N JEFFERSON AVENUE 83 84 City MIAMI BEACH 85 Zip Code FL 33140
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0603, Florida Statutes.

SIGNATURE *J. Asmundsson* **JO ASMUNDSSON** **100002584081**
 Signature Typed or Printed Name of Registered Agent (and title if applicable) (NOT: Registered Agent signature required when reinstating) ***05814298-010041038, 1998**
 DATE **6/1/98**

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition P. V. MAJEWSKI 1330 N. ROYAL POINCIANA BLVD MIAMI SPRINGS, FL 33166
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VP ERIC ENGELMANN 120 S.E. 8 AVENUE HALEAH, FL 33010
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JO ASMUNDSSON 4580 N JEFFERSON AVENUE MIAMI BEACH, FL 33140
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D DANNY JESSUP 117 S. SHORE DRIVE MIAMI BEACH FL 33141
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D BILL WOLAR 1180 ROBIN AVENUE MIAMI SPRINGS FL 33166
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D PILAR RODRIGUEZ 1825 W. 44 PLACE HALEAH FL 33012

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *J. Asmundsson* **J. ASMUNDSSON** **23 April** **305-532-3620**
 Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

CR2E037 (10/97)