FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Aug 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # N93000003764 (8)

HIGHER AUTHORITY PRODUCTIONS, INC.

SMO COLLINS AVENUE SURFESTOR F1. 33154 SURFEST							
US 2. Principal Place of Business 2. Melling Address 2. Melling Address 2. Melling Address 3. Date Incorporated of Outsinfed (0/19/1998) 3. Date of Least Report (0/19/1998) 3. Date of Control of Date of State Date of	9540 COLLINS SUITE 314	AVENUE	SUITE 314				
Suite, Apt #, etc. Suite, Apt #, etc. Suite, A		33154				3. Date Incorporated or Qualified 08/19/1993	3a. Date of Last Report 10/17/1996
Sulte, Apt #, etc. 2		lace of Business	⊢ -				Applied For
City & State City & State City & City City & City		#. etc.					Not Applicabl
Trust Fund Contribution Added to Fees				~		Certificate of Status Desired	1 1 ' -
Country 2/P Country 2/P Country 8. Recomposition for intendigible tax under s. 199.03	·	θ	} —¬ '				
Sincer Address of Current Registered Agent LEVINE, JERROD 9540 COLLINS AVE SURFSIDE FL 33154 82 Street Address (P.O. Box Number is No. Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1509. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registor agent, it am familiar with, and accept the obligations of Socion 617.0502 and 617.0		Country		Countr	у		
LEVINE, JERROD 98-40 COLLINS AVE SURFSIDE FL 33154 82 Street Address (F.O. Box Number is Not Acceptable) 83 Street Address (F.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 City FL 85 Zip Code 86 City FL 85 Zip Code 87 City FL 85 Zip Code 88 City FL 85 Zip Code 88 City FL 85 Zip Code 89 City FL 85 Zip Code 80 City FL 85 Zip Code 80 City FL 85 Zip Code 80 City FL 85 Zip	<u> </u>			30			
SURFSIDE FL 33154 B3 City FL B5 Zip Code The prevaent to the provisions of Sections 617.0502 and 617.1509. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Frorida Statutes, the above-named corporation submits this statement for the purpose of changing its register office or registered agent, or both, in the State of Frorida Statutes. SIGNATURE By City FL B5 Zip Code The City The C		y. Name and Address of Current	. Hegistered Agent	81	Name	10. Name and Address of New He	Bisteled Walli
SURFSIDE FL 33154 B3 City FL B5 Zip Code Add City FL B5 Zip Code City FL B5 Zip Code City FL B5 Zip Code FL S5 Zip C	I FVINE	JERROD		00	01	(D.O. David January)	
STANDARD PLANDARD PLANDARD PLANDARD PLANDARD PLANDARD PLANDARD PLANDARD PLANDARD						ucress (P.O. DOX Multiper is Not Acceptat	נטונ.
IT. 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 register 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 registere agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. Figure Figur	SURFSIE	DE FL 33154		83	1		
15. 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 register office or registered agent, or both. In the State of Fronica Subch change was sulfnivinged by the corporation's board of directors. I hereby accept the appointment as register of agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes. SIGNATURE				84	City		85 Zip Code
SIGNATURE	11. Pursuant	to the provisions of Sections 617.0502	and 617.1508. Florida Statute	s, the abov	re-named co	propration submits this statement for the r	
TITLE SHERIDAN, MARK SHERIDAN, MARK SITURE ADDRESS STREET ADDRESS	SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE	: Registered Ag		quired when reinstating)	DATE
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CITY-ST-ZIP Surfs: Ae., FL 33151 14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the		Surfside, th 3	5) 5 7			and in Continue 140 07/03/03 Free de Continue	<u>upol</u>