

FILE NOW: FILING FEE AFTER MAY 1 IS \$5500

FILED

May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P92000008506 (7)

1. Corporation Name

CONCEPT FILMS INTERNATIONAL, INC.



Principal Place of Business

6801 SW 72ND CT.
MIAMI FL 33143
US

Mailing Address

6801 SW 72ND CT.
MIAMI FL 33143-2906
US

3. Date Incorporated or Qualified
12/02/1992

3a. Date of Last Report
04/24/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

24

25

29

30

9. Name and Address of Current Registered Agent

LONGARAY, MADELEINE D
8380 W. FLAGLER ST.
SUITE 203
MIAMI FL 33144

4. FEI Number
65-0371332

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

10. Name and Address of New Registered Agent

1. Name

2. Street Address (P.O. Box Number is Not Acceptable)

3.

4. City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, I have 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered agent's signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
VARGAS, HENRY
6801 S.W. 72ND CT.
MIAMI FL 33143

☐ DELETE

1

1.1 ADDRESS

1.1 - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

2

2.1 ADDRESS

2.1 - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

3

3.1 ADDRESS

3.1 - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

4

4.1 ADDRESS

4.1 - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

5

5.1 ADDRESS

5.1 - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

6

6.1 ADDRESS

6.1 - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for 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 file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

4/24/97

CR2E034 (9/96)