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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000010288 (8)

ILUMINA FILM'S, INC.

Principal Place of Business

Mailing Address
2800 BISCAYNE BLVD.

FILED Apr 08 1998 8:00am Secretary of State



| 2800 BISCAYNE BLVD<br>#500<br>Miami Fl 33137<br>US |                  |            | !                                      | 2800 BISCAYNE BLVD.<br>500<br>Miami Fl 33137<br>US    |              |               |              |         |                |             | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified |   |             |           |        |            |              |                 |            |
|--|------------------|------------|--|---|--------------|---------------|--------------|---------|----------------|-------------|---|---|-------------|-----------|--------|------------|--------------|-----------------|------------|
|  |                  | -          |  |   |              |               |              |         |                |             |   | 12/07/  | 1992        |           |        |            |              |                 |            |
| 2, Principal P                                     | tace of Busin    | 1055       |  | 28  | , Mailing a  | Address       |              |         |                |             |   | 4. FEI Numb                                   | er          |           |        |            |              | Ap,             | olied For  |
|  | NE 39            | th S       | St.                                    | 26  | 16           | 7 NE 3        | <u>39th</u>  | St      | t.             |             |   | 65-03   | 73826       |           |        |            | Г            | No              | Applicable |
| Suite, Apt.  |                  |            |  |   | Suite, Ap    | ot. #, etc.   |              |         |                |             |   | & Certificate                                 | of Status   | Deciror   | ط<br>  |            | \$8.         | 75 A            | dditional  |
| 22 Miami, FL                                       |                  |            |  | 27  |              |               |              |         |                |             |   | 5. Certificate of Status Desired              |             |           |        |            | Fee Required |                 |            |
| City & State                                       |                  |            |  |   | City & State |               |              |         |                |             |   | 6. Election C                                 | Campaign    | Financir  | ng     | _          | \$5          | .00             | May Be     |
| 23 3313  |                  |            |  |   | 28 33137     |               |              |         |                |             |   | Trust Fund                                    | d Contribu  | ution     |        |            | Ad           | lded to         | Fees       |
| Zip  | Country          |            |  |   | ├─ <b>┐</b>  |               |              |         | Country        |             |   | 8. This corpo                                 | oration ov  | ves or ha | as pai |            |              | ar I <u>nta</u> | ngible     |
| 24   |                  |            | JSA                                    | 29  |              |               |              |         | US             | A           |   | Personal Property Tax due June 30. 🔀 Yes 🗌 No |             |           |        |            |              |                 |            |
|  |                  |            | Idress of Currer                       | it Regii  | tered Ag     | ent           |              | 81      | 1 .            |             |   | 10. Name an                                   | d Addres    | s of Nev  | w Reg  | jistered / | Agent        |                 |            |
| PELAEZ, GEORGE<br>285 HIBISCUS DR.                 |                  |            |  |   |              |               |              |         | '              | Name        |   |   |             |           |        |            |              |                 |            |
|  |                  |            | 82                                     | 82 Street Address (P.O. Box Number is Not Acceptable) |              |               |              |         |                | le)         |   |   |             |           |        |            |              |                 |            |
| MIAMI BEACH FL 33139                               |                  |            |  |   |              |               |              |         |                |             |   |   |             |           | ·<br>  |            |              |                 |            |
|  |                  |            |  |   |              |               |              | 83      | l              |             |   |   |             |           |        |            |              |                 |            |
|  |                  |            |  |   |              |               |              | 84      | <del>- ا</del> | City        | _   |   |             |           |        |            | 85           | Zip C           | ode        |
|  |                  |            |  |   |              |               |              |         | Į              | •           |   |   |             |           |        | FL         | .            | •               |            |
| 11. Pursuant t                                     | to the provis    | ions of t  | Sections 607.050                       | 2 and €   | 07.150B, I   | Florida Stati | utes, the    | above   | e-n            | amed c      | orpora  | ation submits t                               | lhis stater | nent for  | the pu | urpose of  | chang        | ing its         | registered |
| agent I a  | m familiar wi    | th, and    | both, in the State<br>accept the oblig | ations o  | of, Section  | 607.0505, F   | Florida Si   | atutes  | yuu<br>S.      | e corpo     | ration  | is board of bir                               | rectors. 1  | петеру а  | ассер  | t tne app  | ointmei      | ntas i          | egisterea  |
| SIGNATURE  |                  |            |  |   |              |               |              |         |                |             |   |   |             |           |        |            |              |                 |            |
|  | Signature, typed | or printed | name of registered agr                 |   |              | (NC           | OTE: Registe | red Age | ent s          | ignature re | quired w  | when reinstating                              |             |           |        | DATE       |              | -               |            |
| 12.  | - 55             |            | OFFICERS AN                            | D DIRE  |              |               | 13           |         |                |             |   | ADDITIONS                                     | S/CHANG     | ES TO C   | OFFICE | ERS AND    |              |                 |            |
| TITLE  | DP               |            |  |   | Ĺ            | DELETE        | 1.1          | TITLE   |                |             |   |   |             |           |        |            | ☐ Cha        | กลูย            | ☐ Addition |
| NAME   | PELAEZ           |            |  |   |              |               | 1.2          | NAME    |                |             |   |   |             |           |        |            |              |                 |            |
| STREET ADDRESS                                     | 285 HIB          |            |  |   |              |               | 1.3          | STREET  | ADE            | DRESS       |   |   |             |           |        |            |              |                 |            |
| CITY-ST-ZIP  | MIAMI B          | EACH       | FL 33139                               |   |              |               | 1,4          | CITY-S  | ST - Zi        | IP          |   |   |             |           |        |            |              |                 |            |
| TITLE  |                  |            |  |   | Ĺ            | DELETE        | 2.1          | TITLE   |                |             |   |   |             |           |        |            | ☐ Cha        | nge             | Addition   |
| NAME   |                  |            |  |   |              |               | 2.2          | NAME    |                |             |   |   |             |           |        |            |              |                 |            |
| STREET ADDRESS                                     |                  |            |  |   |              |               | 2.3          | STREET  | ADE            | DRESS       |   |   |             |           |        |            |              |                 |            |
| CITY-ST-ZIP  |                  |            |  |   |              |               | 2. 4         | CITY-S  | ST-Z           | ŽIP         |   |   |             |           |        |            |              |                 |            |
| TITLE  |                  |            |  |   |              | DELETE        | 3.1          | TITLE   |                |             |   |   |             |           |        |            | ☐ Cha        | nge             | Addition   |
| NAME   |                  |            |  |   |              |               | 3.2          | NAME    |                |             |   |   |             |           |        |            |              |                 |            |
| STREET ADDRESS                                     |                  |            |  |   |              |               | 3.3          | STREET  | ADE            | DRESS       |   |   |             |           |        |            |              |                 |            |
| CITY-ST-ZIP  |                  |            |  |   |              |               | 34           | CITY-S  | ST-2           | JP I        |   |   |             |           |        |            |              |                 |            |
| TITLE  |                  |            |  |   |              | DELETE        |              | TITLE   | <del></del>    |             |   |   |             |           |        |            | ☐ Cha        | пде             | Addition   |
| NAME   |                  |            |  |   |              |               | 4.2          | NAME    |                |             |   |   |             |           |        |            |              | •               |            |
| STREET ADDRESS                                     |                  |            |  |   |              |               | 43           | STREET  | ADD            | DRESS       |   |   |             |           |        |            |              |                 |            |
| CITY-ST-ZIP  |                  |            |  |   |              |               |              | CITY~S  |                |             |   |   |             |           |        |            |              |                 |            |
| TITLE  |                  |            |  |   |              | DELETE        |              | TITLE   |                | -           |   |   |             | •         |        | •          | Cha          | noe             | Addition   |
| NAME   |                  |            |  |   |              |               | - 1          | NAME    |                | ļ           |   |   |             |           |        |            |              | -               |            |
| STREET ADDRESS                                     |                  |            |  |   |              |               |              | STAEET  | Ann            | DRESS       |   |   |             |           |        |            |              |                 | i          |
| CITY-ST-ZIP  |                  |            |  |   |              |               |              | CITY-S  |                |             |   |   |             |           |        |            |              |                 |            |
| TITLE  |                  |            |  |   |              | DELETE        |              | TITLE   | -( - 21        |             |   |   |             |           |        |            | ☐ Cha        | nge             | Addition   |
| NAME   |                  |            |  |   | L.,          |               |              | NAME    |                | - 1         |   |   |             |           |        |            | UIM          | ւպս             |            |
| STREET ADDRESS                                     |                  |            |  |   |              |               |              |         | 400            | nree        |   |   |             |           |        |            |              |                 |            |
|  |                  |            |  |   |              |               |              | STREET  |                |             |   |   |             |           |        |            |              |                 |            |
| CITY-ST-ZIP  |                  |            |  |   |              |               | 6.4          | CITY-5  | ( - Zi         | iP          |   |   |             |           |        |            |              |                 |            |

14. Thereby 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 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 empty od 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 organ attachment with an address.

SIGNATURE: V A MARCH

2/23/98

(205) EZC C152