

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P93000008580 (1)**

1. Corporation Name

U.S. 1 PRODUCTIONS, INC.



Principal Place of Business

Mailing Address

518 INDUSTRIAL AVE
#14
BOYNTON BEACH FL 33426
US

518 INDUSTRIAL AVE
#14
BOYNTON BEACH FL 33426
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified

01/26/1993

3a. Date of Last Report

02/28/1995

4. FEI Number

65-0383666

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$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

10. Name and Address of New Registered Agent

CONNORS, MICHAEL W
515 N FLAGLER DR
SUITE 1900
WEST PALM BEACH FL 33401

OMIT

81 Name

THOMAS P. MOTT

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

10453 BOYNTON PLACE CIRC

83

84 City

BOYNTON BEACH

FL

85 Zip Code

33437

11. Pursuant to the provisions of Sections 607.0502 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 approved by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

THOMAS P. MOTT

[Handwritten Signature]

1/1/96

Signature, typed or printed name of registered agent and street address

Signature, typed or printed name of new registered agent and street address

Date

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED
	VS ZEINERT, LAUREL	10453 BOYNTON PLACE CIR	BOYNTON BEACH FL	<input checked="" type="checkbox"/>
	P MOTT, THOMAS P	10453 BOYNTON PL CIR	BOYNTON BCH FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETED	Change	Addition
11				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

000001780420
-04/15/96--01064--018
***200.00

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, trustee or empowered 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 on an attachment with an address.

SIGNATURE: THOMAS P. MOTT *[Handwritten Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96
1-407-369-4209
SG 4-15-96

CR2E034 (12/95)