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

**PROFIT** CORPORATION ANNUAL REPORT



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

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1. Corporatio	n Name	# P930 PRODUCTIONS, I		)18060	(2)							
Principal Place			M	ailing Address								
	lups indust Iville BCH. I			6811 PHILLIPS IND JACKSONVILLE BO US		VD.						
		<del></del>		03				3. Date Incorporated or Qualified 03/04/1993	3a. (	Date of Last F 05/01/		
	Principal Place of Business 2a, Mailing Address 26		Mailing Address	s			E0-2199E90			Applied For		
Suite, Apt.	#, etc.		27	Suite, Apt. #, etc.	*			5. Certificate of Status Desired	X	\$8.75	Not Applicable  Additional	-
City & State	9		28	City & State				6. Election Campaign Financing	- <u>-</u>	\$5.0	Required  May Be	
7ip		Country 25	29	Zip Country			Trust Fund Contribution  8. This corporation has liability for i		e tax under s	d to Fees 199.032,	-	
	9. Name	and Address of Curre		tered Agent	30			Florida Statutes Yes  10. Name and Address of New R				
<b>DDIAI</b>	NEV DON				1	B1	Name					
	DLEY, DON PHILLIPS II	m. NDUSTRIAL BLVD			Ī	82	Street Add	dress (P.O. Box Number is Not Acceptable	e)			
	SONVILLE				Ī	В3		—	<del></del>			$\dashv$
						B4	City			. <b>85</b> Zij	p Code	-
11. Pursuant t	to the provision	ons of Sections 607.050	02 and 607	7.1508, Florida Statu	tes, the abov	l e-na	amed corpo	oration submits this statement for the purp and of directors. Thereby accept the appo	ose of		enistered office	اء
familiar wit	de	M. Brud	rida. Such Sion 607.0	ocoo, nonao omnote.	ed by the co s.	γτρς	ration's boa	ard of directors. Thereby accept the appo	intment	as registered	agent. I am	
12.	Slyna! re, typed r	or printed name of registered age OFFICERS At	and their a		DIE Begistered A	<b>3</b> -11	Signature empir	ADVITIONS (SUBMORS 70, 655)	DATE		·	<u> </u>
TOLE	DSPT			DELETE	1. 1 TITI	 F	I	ADDITIONS/CHANGES TO OFFI	JERS A	ND DIRECTO  Change	RS IN 12	R2E034 (12/95)
NAME.		LEY, DON M			1.2 NAN	'E				onungo	LJ Nostion	1
STREET ADDRESS		DEER TRACE			1.3 S₹RI	EFT A	ADORESS					03
C-TY - ST - ZIP	L	E VEDRA FL			14 CHY	'- ST	- 2IP					32
TITLE	ST	DAVID M		DELETE	2 1 TI!(	F				Change	Addition	
NAME Carret Approved		RBOR LAKE LN			2.2 NAM							
STREET ADDRESS CITY-ST-ZIP		EVEDRA FL					(DDRESS					_
THILE		LILOTO I L		DELETE	24 CITY 3 1 TITL		- Z(P					
NAME					3.2 NAM					Change	Addition	
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					3 4 C-TY		1					
TITLE				DELF TE	4 1 1111		···			Change	Addition	-
NAME					4.2 NAM	E.						
STREET ADDRESS					4.3 STRE	ET A	DORESS					
CITY-ST-ZIP					4.4 CHY	- \$1.	ZIP					
TrILE				DELETE	5 1 TITL	F	1			☐ Change	☐ Addition	1
NAME STUCK LADDRESS					5.2 NAM							
STREET ADDRESS					5.3 STRE							
CITY-ST-ZIP TITLE				DEFFIE	5.4 CITY		ZiP	·		·	·	
NAME				DOLLER	6 1 THILI					☐ Change	☐ Addition	
STREET ADDRESS					6.2 NAMI							
CITY-ST-ZIP					6.3 S1HE							
	certify that t	ne information supplied	with this f	tion of the first of the first	6 4 C TY	-12	<i>I</i> P 1					

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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of chapter 607, Florida Statutes; and that my name

SIGNATURE:

3/20/96 (904) 292-4050