

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000025992 (7)

1. Corporation Name

SHOW-POP USA, INC.



Principal Place of Business

Mailing Address

2200 CORPORATE BLVD NW
SUITE 401-A
BOCA RATON FL 33491
US

2200 CORPORATE BLVD NW
SUITE 401-A
BOCA RATON FL 33491
US

3. Date Incorporated or Qualified
04/01/1993

3a. Date of Last Report
05/25/1995

2. Principal Place of Business

2a. Mailing Address

21 7491 North Federal Hwy

26 Suite, Apt. #, etc.

22 Ste. 271

27 Suite, Apt. #, etc.

23 Boca Raton FL

28 City & State

24 33487 25 USA

29 30 Country

4. FEI Number

65-0398790

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PINONE, ANTHONY
2200 CORPORATE BLVD NW
STE 401
BOCA RATON FL 33431

81 Name

GREGORY J. BLODIG, ESQ.

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

GREENSPOON, MARDER ET AL

83

100 WEST CYPRESS CREEK RD., STE. 700

84 City

FT. LAUDERDALE

FL

85 Zip Code

33309

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 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

Gregory J. Blodig

11-2-96

Signature typed or printed name of registered agent and for application

(Initials) Registered Agent's signature required when incorporating

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DP
PINONE, ANTHONY
2200 CORPORATE BLVD NW #401
BOCA RATON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
ALTMANN, PAUL
2200 CORPORATE BLVD NW 401-A
BOCA RATON FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
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STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
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STREET ADDRESS
CITY - ST - ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

7491 No. Federal Hwy

Ste. 271

Boca Raton FL 33487

Change Addition

7491 N. Federal Hwy

Ste. 271

Boca Raton FL 33487

Change Addition

Change Addition

Change Addition

Change Addition

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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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Anthony Pinone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony Pinone, Pres.

8/5/96 (407) 995-9955

Date

Telephone #

CR2E034 (3/96)