

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

\$61.25
Amended

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
97 MAY 19 PM 2:58
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P93000030871

1. Corporation Name

World Vision Entertainment, Inc.

Principal Place of Business

Mailing Address

407 Whooping Loop Lane, Suite 1663
Altamonte Springs, FL 32701

3. Date Incorporated or Qualified

3a. Date of Last Report

4/26/93

4. FEI Number

59-3199978

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

2. Principal Place of Business

2a. Mailing Address

407 Whooping Loop Lane

- SAME AS

21 Suite Apt. # etc.

26 Suite, Apt. #, etc. Principal

22 Suite 1663

27 City & State Place of Business =

23 Altamonte Springs, FL

28 Zip Country

24 32701

25 U.S.A.

29 Zip Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Jamie Piromalli
396 Hickory Drive
Maitland, FL 32751

81 Name

William F. Lawless

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

217 North Westmonte Avenue

83 Suite 3022

84 City

Altamonte Springs

FL

85 Zip Code

32714

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

William F. Lawless

5/20/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

"P/C" Change Addition

Jamie P. Piromalli

396 Hickory Drive

Maitland, FL 32751

"D" Change Addition

Ashly Kohly

1420 PLACE PICCARDY

Winter Park, FL 32789

800002190298-88

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Change Addition

Change Addition

Change Addition

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Change Addition

14. I do hereby 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 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jamie P. Piromalli

5/20/97

(407) 834-9831

Date

Daytime Phone #

CR2E034 (9/96)