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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000033160 (1)

PROMED PRODUCTIONS, INC.

Principal Place of Business 5610 PGA BLVD SUITE 114 PALM BEACH GARDENS FL 33410		Mailing Address				(ADDITION THAT HE WASHE BELLE BELLE BELLE BOTH BOTH BOTH BOTH HOLD BELLE BELLE BOTH BOTH BOTH BOTH BOTH BOTH			
		5610 PGA BLVD SUITE 114 PALM BEACH GARDENS FL 33418-3838							
U\$		U\$				 Date Incorporated or Qualified 05/06/1993 	1 '	ate of Last Re 1 25/1996	eport
	lace of Business	2a. Mailing Address				4. FEI Number		 	plied For
21 Suite, Apt.	# ote	26 Suite, Apt. #, etc.				65-0405447			t Applicable
22 Suite, Apr.	. #, B(C	27 20116, Apr. #, etc.				5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat	le	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added t	
24 33Y	Country	Zip		ountry		8. This corporation has liability for	intengible Yes	tax under s.	. 199.032,
24 05	1 8 25 9. Name and Address of Curren	29	30			Florida Statutes 10. Name and Address of New R			· · · · · · · · · · · · · · · · · · ·
CAI		i uchieraten võenr		81	Name	ID. Italia and Address of New I	Mintered	- Nour	
	BETELLO, CARL M 10 PGA BLVD SUITE 114								·····
		82 Street Addr			Address (P.O. Box Number is Not Accepte	ble)			
	89 Delcte Line LM BEACH GARDENS FL 33418			B 3					
ı •				84	City	· !!!		85 Zip (Code
44 8	10-15-07-070	0 603 4500 5114- 61-				A series de la companya de la compan	<u>F</u> L		
office or i	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was ations of, Section 607.0505, F	authoriz Iorida S	zed by tatute:	the cor	corporation submits this statement for the poration's board of directors. I hereby acceptations	pt the app	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered age	of and title if applicable (NC	TE: Registe	ered Age	en) Bignature	required when re-instating)	DATE		-
12.	OFFICERS AND		18	3.		ADDITIONS/CHANGES TO OFF	CERS ANI	DIRECTOR	IS IN 12
TITLE	DVP	DELETE	1.1	TITLE				Change	Addition
NAME	GRABEL, JORDAN		12	NAME					
STREET ADDRESS	5610 PGA BLVD SUITE 114		1.3	STREET	ADDRESS	,			
CITY-SI-ZIP	PALM BEACH GARDENS FL		14	CITY-S	T-ZIP				
MILE	PD	☐ DELETE	2.1	TITLE				Change	Addition
NAME	SABATELLO, CARL M		2.2	NAME					
STREET ADDRESS	5810 PGA BLVD SUITE 114		2.3	STREET	ADDRESS				
CITY-ST-ZIP	PALM BCH GARDENS FL	DELETE		4 CITY-	ST-ZIP			T Change	TT Addition
THILE	SD SABATELLO, MICHAEL J	☐ vecelt	-	TITLE				Change	Addition
NAME	5610 PGA BLVD SUITE 114		- 1	NAME	4000000				
STREET ADDRESS	PALM BCH GNDS FL				AODRESS	İ			
CITY-S1-7IP TILLE	VPD	DELETE		I. CITY-: I TITLE	21-7th	 		Change	Addition
NAME	SABATELLO, PAUL	- Decem		2 NAME					
STREET ADDRESS	5610 PGA BLVD SUITE 114				ADDRESS				
CITY-ST-ZIP	PALM BCH GNDS FL			CITY-S		1			
TITLE	TD	DELETE		TITLE				Change	Addition
NAME	SABATELLO, THEODORE			NAME					1.7
STREET ADORESS	\$404 PGA BLVD \$109		1		ADDRESS	5610 PGA BNd., Suit	e 114	い	かり
CITY - ST - ZIP	PALM BCH GNDS FL		- 1	CITY-S		, , , , , , , , , , , , , , , , , , , ,		7	N
TITLE		☐ DELETE		TITLE				Change	Addition
NAME			62	NAME		6000021	ဥတ္တန	<u>7</u> 6	
STREET ADDRESS			6.3	STREET	ADDRESS	1 -05/08/97010	1080	30	
	1					###185 OO			

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 chanted, own an attachment with an address.