


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

FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

DOCUMENT # P93000044771 (2)
 1. Corporation Name
RED BOX STUDIO, INC.



Principal Place of Business 2627 NW 33 ST #2209 FT. LAUDERDALE FL 33309	Mailing Address 2627 NW 33 ST #2209 FT. LAUDERDALE FL 33309
-------------------------------------------------------------------------------	-------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 4331 NE 16 AVE	26 4331 NE 16 AVE			06/21/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				65-0418255	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23 FT LAUD FL		28 FT LAUD FL		\$8.75 Additional Fee Required	
24 Zip		29 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
33334		33334		\$5.00 May Be Added to Fees	
25 Country		30 Country		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
BROWARD		BROWARD			

9. Name and Address of Current Registered Agent

LOPEZ, VALERIE L
 2627 NW 33 ST., #2209
 FT. LAUDERDALE FL 33309

10. Name and Address of New Registered Agent

81 Name	VALERIE L. LOPEZ
82 Street Address (P.O. Box Number is Not Acceptable)	4331 NE 16 AVE
83	
84 City	FT LAUD
85 State	FL
86 Zip Code	33334

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: *Valerie L. Lopez* **VALERIE L. LOPEZ, PRINCIPAL** DATE: **4/12/98**

12. OFFICERS AND DIRECTORS

TITLE		<input type="checkbox"/> DELETE
NAME	LOPEZ, VALERIE L	
STREET ADDRESS	2627 NW 33 ST., #2209	
CITY-ST-ZIP	FT. LAUDERDALE FL 33309	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	VALERIE L. LOPEZ	
1.3 STREET ADDRESS	4331 NE 16 AVE	
1.4 CITY-ST-ZIP	FT LAUD FL 33334	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 amendment with an address.

SIGNATURE: *Valerie L. Lopez* **VALERIE L. LOPEZ, PRINCIPAL** DATE: **APRIL 12 98**

CR2E034 (10/97)