PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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

FILED Mar 13 1997 8:00am Secretary of State

DOCU	MENT #	P930	00066183	(3)

HIGH 5	PRODUCTIONS, INC.	Mailing Address POST OFFICE BOX 490 ZEPHYRHILLS FL 33539-			
				3. Date incorporated or Qualified 09/17/1993	3a. Date of Last Report 04/29/1996
2. Principal F 21	Place of Business	28. Mailing Address 26		4. FEI Number 65-0444002	Applied For Not Applicable
Sinte, Apt # 65		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	de	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28	T Country	Trust Fund Contribution	Added to Fees
Ζ(μ) 4	Country	Ζιρ 29	Country 30	8. This corporation has tiability for Florida Statutes	intangible tax under s. 199.032, ☑ Yes □ No
-L	9. Name and Address of Currer		1001	10. Name and Address of New Re	
	MCKE, GEORGIA H		81 Name		
5213 3RD STREET			82 Street Add	lress (P.O. Box Number is Not Acceptat	ole)
Æ	PHYRHILLS FL 33541		83		
				·····	
			84 City		FL 85 Zip Code
SIGNATURE	Stration by end proved area of each in Eagl		TE Bisgistered Agent signature requ	ation's board of directors. Thereby acceptived when reinstaling) ADDITIONS/CHANGES TO OFFICE	DATE
TER AMF	PD Lemcke, Georgia H	beert	11 TITLE 1.2 NAME		Ti cuande Ti vacuus
AREELADDRESS	5213 3RD STREET		1.3 STREET ADDRESS		
017-51-70	ZEPHYRHILLS FL		1.4 CITY-ST-ZIP		
131.1	VSD	☐ DELETE	21 TITLE		Change Addition
NAME TREET ADDRESS	LEMCKE, RAYMOND E. 5213 3RD STREET		2.2 NAME 2.3 STREET ADDRESS		
antenanas alt SI-AP	ZEPHYRHILLS FL		2.3 STREET ADDRESS		
JUE	TD	☐ DELETE	3 1 TITLE		Change Additio
NAME:	BOEDECKER, RAYNA N.		3 2 NAME		
STREET Abbress			3.3 STREET ADDRESS		
TY-\$1 ZiP IME	HOLIDAY FL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Additio
NAME			4. 2 NAME		Land Control of Control
Ze bir iA 14590.			4 3 STREET ADDRESS		
HY 51 7 ir		Tories	4.4 CITY - ST - ZIP		Dh-sair Tanan
ille 		☐ DELETE	51 TITLE		Change Additio
MME Prefiacioness	!		5.2 NAME 5.3 STREET ADDRESS		
oner cwegetus. StylStozie			5.4 CHTY - ST - ZIP		
r'ut		DELETE	6.1 TITLE		Change Add:tio
NAME			6.2 NAME		
CB-EEALQIBESS			63 STREET ADDRESS		
114 St 79			64 CITY - ST - ZIP		

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 make alled 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 of Block 13 of changed for on an attachment with an address