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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

SIGNATURE:

DIVISION OF CORPORATIONS

DOCUMENT # P9400004842 (8) SUNSHINE KIDVID ENTERTAINMENT, INC.						
Principal Place	of Business	Mailing Address		[160/140/140 10// 8/6// 8/6// 8		/
1915 HARRISON ST. HOLLYWOOD FL 33020		1915 HARRISON ST. HOLLYWOOD FL 330	20			
				3. Date Incorporated or Qualified 01/19/1994	1 '	f Last Report /10/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt. #	t. etc	Suite, Apt #, etc.		65-0464761		Not Applicable
22	,, 010.	27		5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing		\$5.00 May Be
23 Z⊮p	Country	28	Country	Trust Fund Contribution		Added to Fees
24	25	21p	30	8. This corporation has liability for Florida Statutes		under s. 199.032,
	9. Name and Address of Curre	· · · · · · · · · · · · · · · · · · ·	1991	10. Name and Address of New		ent
			81 Na Dout	GLAS BISCHOFF.		
-LANE,			82 Street Add	tress (P.O. Box Number is Not Accepta	able)	· · · ·
	N.W. 10TH STREET		MOR	GAN, LEWIS + Bo	OCKIUS.	, LLP
REMBR	OKE PINES FL 33026		83 200 S	O. BISCAYNE BLUD.,	#530	o o
			B4 City	0	2 -1	85 Zip Code
			/ <i>M</i> /	77		1000
11. Pursuant to	o the provisions of Sections 607 050	12 and 607 1508. Florida Statute	es, the above partial cours	viation cultimite this statement for the o		
11. Pursuant to or registere	o the provisions of Sections 607,050 so agent, or both, in the State of Flor for and accept the obligations of Sec	02 and 607,1508, Florida Statute rida. Such change was authorize	es, the above named corpo ed by the corporation's boa	oration submits this statement for the paired of directors. I hereby accept the ap	surpose of chang prointment as req	ging its registered offic gistered agent. Lam
	o the provisions of Sections 607.050 or agent, or both, in the State of Flor h, and accept theyobligglope of, Sec		es, the above named corpo ed by the corporation's boa	oration submits this statement for the paired of directors. Thereby accept the ap	ourpose of chang prointment as req	jing its registered offic gistered agent. Fam
SIGNATURE	o the provisions of Sections 607,050 of agent, or both, in the Strate of Floring, and accept the policy of the Section of Section (Section 2014) of the Section of Provision of Provisions and Section of Provisions and Sec	KY o L DOUBLAS K	es, the above named corpo ed by the corporation's boa BISOPFF		purpose of chang prointment as req #/IS/91	ing its registered offic gistered agent. I am
SIGNATURA	Signature Appet or pricted number of neglectores and OFFICERS AN	Nouclas K	JISODFF		7/15/9(٧
SIGNATURE 12.	Signature Josef or protect ourse of registrates and OFFICERS AF	Holak DouceASK	LE Registered Agent Signature require	of wher renutating	7/15/9 (DAYE FICERS AND DI	٧
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MALA WASA RE AND TYPED OR PRINTED NAME OF FIGURING OFFICER OR DIRECTOR LAURA A KINA