

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 11 PM 8: 28

DOCUMENT # P94000005159 (6)

1. Corporation Name

JELLY BEAN JUNGLE PRODUCTIONS, INC.

Principal Place of Business

**1915 HARRISON ST.
HOLLYWOOD FL 33020**

Mailing Address

**1915 HARRISON ST.
HOLLYWOOD FL 33020**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/20/1994

3a. Date of Last Report

4/15/94

2. Principal Place of Business

21

Suite, Apt. #, etc.

2a. Mailing Address

26

Suite, Apt. #, etc.

4. FEI Number

65-0558051

Applied For

☐ Not Applicable

22

City & State

27

City & State

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23

Zip

Country

28

Zip

Country

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

25

29

30

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name

JERE J. LANE, C.P.A.

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

11538 N.W. 10TH ST.

83.

84. City

HEMBROKE PINES

FL

85. Zip Code

33026

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

[Signature]

JERE J. LANE

4/5/95

DATE

(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE **CHIEF EXECUTIVE OFFICER**
NAME **JERRELL A. BRESLIN**
STREET ADDRESS **1915 HARRISON ST.**
CITY- ST- ZIP **HOLLYWOOD, FL 33020**

TITLE **PRESIDENT & CHAIRMAN**
NAME **THOMAS E. RODGERS, JR.**
STREET ADDRESS **1915 HARRISON ST.**
CITY- ST- ZIP **HOLLYWOOD, FL 33020**

TITLE **TREASURER**
NAME **ROBERT SHAPIRO**
STREET ADDRESS **1915 HARRISON ST.**
CITY- ST- ZIP **HOLLYWOOD, FL 33020**

TITLE **SECRETARY**
NAME **LAURA A. KING**
STREET ADDRESS **1915 HARRISON ST.**
CITY- ST- ZIP **HOLLYWOOD, FL 33020**

TITLE **DIRECTOR**
NAME **RANDOLPH MCKEAN**
STREET ADDRESS **6401 S.W. 87TH AVE.**
CITY- ST- ZIP **MIAMI, FL 33173**

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information included in 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] **LAURA A. KING**

4/5/95

(305) 929-6902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR