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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000019812 (4)

PRODUCTIONS AND DISTRIBUTION SERVICES CORP.

FILED May 22 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 19241 CW 20TH TEDD 19241 CW 20TH TEDD					·			
12341 S.W. 39TH TERR. 12341 S.W. 39TH TERR. MIAMI FL 33175 MIAMI FL 33175-3030				-				
					3. Date Incorporated or Qualified 03/15/1994	Sa. Da	te of Last F	Report
	lace of Business	2a. Mailing Address			4. FEI Number	1		pplied For
14350 S.W. 172nd Sr 20 14350 5			W. 172nd Sr.		65-0473920	Not Applicable		
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional lequired
City & State 3 MAM /		City & State City & State FLOUND		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
	3177 Country	Zip 29 33/7-7	Country 30 U.S.		8. This corporation has liability for in	ntangible	tax under s	
13	9. Name and Address of Curren		30 20 30 7		10. Name and Address of New Reg		 -	
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	41 S.W. 39TH TERR.		82 Stree	Addros	CO.O. Boy Number is Not Assentab	<u>مرم</u>		
	MI FL 33175		62 Siree	1250	s (P.O. Box Number is Not Acceptab S. W. 72nd	"Sr/2	EET	
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			84 City				ler Zin	Codo
				iam	,	FL	3	Code シブフ
1. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the above-name	d corpora	ation submits this statement for the p	urpose of	changing i	its registered
agent Fa	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida, Such change was a ations of, Section 607,0505, Flo	utnorized by the co rida Statutes.	rporation	is board of directors, I hereby accep	tine appo	orminent as	i reĝistereo
IGNATURE								
	Sup alone hyped or product rame of regustered age		Registered Agent signatu	ure required v		DATE		
2.	OFFICERS ANI		18.	⊤⊅	ADDITIONS/CHANGES TO OFFIC			
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IFY SI ZIF	Leadily that the information and the	d with this diling sless and swalld	6.4 CITY - ST - ZIP	stated in	Section 110 07/3\/ii\ Elector Cat to	further	partituita	t tho
informatio	by certify that the information supplied on indicated on this annual report or s	uppolemental annual report is tr	ue and accurate a:	nd that m	v signature shall have the same lega	effect as	if made ur	nder oath: th:
ian⊤an o	officer or director of the Arporation or in Block 12 of Block 12 if Chartied, or	tne receiver or trustee empower r on an attachment with an add	ered to execute this ress.	s report a	s required by Chapter 607, Florida S	iatules; er	ia that my	name
-47 5000	1.11-		r na an Curro an C	1	AGO 5/1/97 6	الممو	071	1710
SIGNAT	URE:	HU	TONIU D	ヘレトノ	460 S/1/97 G	زويح	741-1	1+10