FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000020382 (5)**

1. Corporation Name

STAR TV PRODUCTIONS, INC.

Principal Place of Business

7355 NW 41 ST
MIAMI FL 33166
US

Mailing Address

7355 NW 41 ST
MIAMI FL 33166
US

3. Date Incorporated or Qualified: **03/16/1994**

3a. Date of Last Report: **01/19/1995**

4. FEI Number: **65-0476329** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

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

2. Principal Place of Business

21 14232 SW 136 ST
22 Suite, Apt. #, etc.
23 City & State: Miami FL
24 Zip: 33186 25 Country: DADE

2a. Mailing Address

26 14232 SW 136 ST
27 Suite, Apt. #, etc.
28 City & State: Miami FL
29 Zip: 33186 30 Country: DADE

9. Name and Address of Current Registered Agent

AMKGS REGISTERED AGENTS, INC.
1980 SUNBANK INTERNATIONAL CENTER
ONE SE THIRD AVE
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0340 and 607.1622, 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: DATE

12. OFFICERS AND DIRECTORS

TITLE: PS
NAME: CROUSILLAT, MARIA E
STREET ADDRESS: 11160 SW 93RD AVE
CITY ST ZIP: MIAMI FL
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE ☐ Change ☐ Addition
2 NAME
3 STREET ADDRESS
4 CITY ST ZIP

2 TITLE ☐ Change ☐ Addition
2 NAME
2 STREET ADDRESS
2 CITY ST ZIP

3 TITLE ☐ Change ☐ Addition
3 NAME
3 STREET ADDRESS
3 CITY ST ZIP

4 TITLE ☐ Change ☐ Addition
4 NAME
4 STREET ADDRESS
4 CITY ST ZIP

5 TITLE ☐ Change ☐ Addition
5 NAME
5 STREET ADDRESS
5 CITY ST ZIP

6 TITLE ☐ Change ☐ Addition
6 NAME
6 STREET ADDRESS
6 CITY ST ZIP

CR2E034 (12/95)

14. I hereby certify that the information supplied with this filing is valid, and 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 with an address.

SIGNATURE: [signature] 2/1/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #