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

PROFIT CORPORATION -ANNUAL REPORT 1999°



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000030045

Corporation Name

ACTIVE IMAGES, INC.

Principal	Place	òf	Business

Mailing Address

FILED Jan 28, 1999 8:00am **Secretary of State**

01-28-1999 90038 043 ***150.00



FT. LAUDERDAL		FT. LAUDERDALE FL 33326				DITE IN THIS (ODAGE		
	The state of the s				l	RITE IN THIS	SPACE	 	
Sak i					 Date Incorporated or Qualife 04/20/1994 	d		z	
2 Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		App	lied For	
- i ' '		26			65-0562943		Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 Ac			
22 27						\$5.00 N	4		
City & State City & State 23 28				,	Election Campaign Financin Trust Fund Contribution	"	Added to		
Zip Country Zip Country			Country	,	8. This corporation owes the co	urrent year Inta			
24 29 30					Personal Property Tax.				
9. Name and Address of Current Registered Agent					10. Name and Address of Nev	Registered A	lgent		
	The state of the s	The state of the s	81	Name	,				
YELMAN, MICHAEL ACTI 1584 EASTLAKE WAY		82							
	AUDERDALE FL 33326		83	 	200.000 (10.000 0 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	271.4 KE 11 B 814 K	<u>. 114 as 4 taur 6</u> 1116 as 111 as 121 à	1231 5 1 1 2 2	
11. 0	AODENDALE 1E 000E0						85 Zip C		
	1		84	1		FL		,	
ices propries	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligat	and 607 1508 Florida Statutes	the abov	e-named corp	oration submits this statement for t	ne purpose of	changing its r	registered	
office or re	egistered agent, or both, in the State of	of Florida: Such change was auth	prized 60	the corporation	on's board of directors. I hereby ac	ept the appoin	itment as reg	istered	
agent. I a	m familiar with, and accept the obligat	ons of Section 607.05057-1000	Statutes	<i>†</i>		1-7-	44	. 1	
SIGNATURE	MICHAEL YELMAN) - MUSIUSAI (KX	$\mathbf{x} \mathbf{w}$	ノ 」	d when reinstating) ((3), 4	DATE	<u>. * 1</u>		
	Signature, typed or printed name of registered agent OFFICERS ANI		13.	III SIGNADIRE (EQUITE	ADDITIONS/CHANGES TO	DEFICERS AN	D DIRECTOR	RS IN 12	
12.	OFFICERS AND	DELETE	1.1 TITLE	<u> </u>	7.2 VII.2 MAG		[] Change	☐ Addition	
TITLE	VELLARAN MICHAEL	C Decere			NEW ATTEN				
NAME ,	YELMAN, MICHAEL		1.2 NAME		•			i	
STREET ADDRESS	1584 EASTLAKE WAY			T ADDRESS					
CITY-ST-ZIP	FT. LAUDERDALE FL 33326		1.4 CITY-S	ST-ZIP L			Change	Addition	
TITLE		☐ DELETE	2.1 TITLE	-		•	Cl Cutings		
NAME.			2.2 NAME		· ·		•	-	
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CITY-ST-ZIP			4.4 CITY-5	ST-ZIP		• • • •		Addition	
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NAME .		•	5.2 NAME	TADORESS .		* *	* * *		
STREET ADDRESS	Į į:	•			A Property of the Control of the Con		•		
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TITLE -	HER SASTLES (A-)	☐ DELETÉ	1						
NAME			6.2 NAME		. •				
STREET ADDRESS	FI (APPROVED A. C.		6.3 STREE	ET ADDRÉSS		•			

14. I 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 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 respive 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 changes on an attachment with an address, with all other like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE

STREET ADDRESS