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 # P94000033464

1. Corporation Name

HERSEY PRODUCTIONS, INC.

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90119 015 ***150.00



Principal Place	of Business	Mailing Address			Į.	
4062 NE 7TH AVENUE 4062 NE 7TH AVENU						
OAKLAND PARK FL 33334 OAKLAND PARK					DA MOTIMOITE IN THE CRACE	
US US					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualifed	
	· · · · · · · · · · · · · · · · · · ·	T	_		05/04/1994	
2. Principal Pl	ace of Business	2a. Mailing Address	× =	-	· · · · · · · · · · · · · · · · · · ·	
21		26			65-0488608 Not Applicable	
Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional Fee Required	
22						
		City & State	& State		6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	├ ─ `	¬ "		8. This corporation owes the current year Intangible Personal Property Tax. Diffes No	
24	25		30		1 Stocker Teporty Town	
	9. Name and Address of Current	Registered Agent	8	1 Nam	10. Name and Address of New Registered Agent	
LIEDO	SEV DON		•	ij Nam	me · .	
HERSEY, RON			8:	82 Street Address (P.O. Box Number is Not Acceptable)		
611 NW 76TH TERRACE				<u> </u>		
PLAN	ITATION FL 33324		8:	3	•	
	•		8-	4 City	y 85 Zip Code	
			"	City	FL S E S S S S S S S S	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the abo	ve-name	ned corporation submits this statement for the purpose of changing its registered	
office or a	onistered agent or both in the State of	Florida, Such channe was auti	าดตรคด ก	v the cos	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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND		13.	<u>-</u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	HERSEY, LAURIE-ALTERMAN		1.2 NAME	•	1:	
STREET ADDRESS	611 NW 76 TERRACE		1.3 STRE	ET ADDRES	IESS	
	PLANTATION FL 33324		1.4 CITY-			
CITY-ST-ZIP	PD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition	
NAME	HERSEY, RON	_ : ===	2.2 NAME			
1	611 NW 76 TERRACE			- ET ADDRES	Ecc	
STREET ADDRESS				* .		
CITY-ST-ZIP	PLANTATION FL 33324		2.4 CITY 3.1 TITLE		Change Addition	
TITLE	K-g ·				, James Grands	
NAME	•		3.2 NAME			
STREET ADDRESS	•			ETADORES	iess .	
CITY-ST-ZIP			3.4. CITY		☐ Change ☐ Addition	
ΠILE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition ☐	
NAME			4. 2 NAM	E		
STREET ADDRESS			4.3 STRE	ET ADDRES	ESS	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME	=		
STREET ADDRESS			5.3 STRE	ET ADDRES	RESS	
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
		. *	6.2 NAME	Ę		
NAME STREET ADDRESS	(1 <mark>4.)</mark> Migration (1. 1912) The state of the		6.3 STRE	ET ADDRES	ESS	
1			6.4 CITY-	ST-ZIP		
CITY-ST-ZIP	•			_,		

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 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 andress, with all other like empowered.

SIGNATURÉ: