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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

P94000034521 (2)

 Corporation Name PANDAMONIUM FILMS, INC.

2175 HUNTERFIELD ROAD MAITLAND FL 32751

2. Principal Place of Business

Suite, Apt. #, etc

Orty & State

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Principal Place of Business

Mating Address

2a. Mail ig Address

Oity & State

Suite, Apt. #, etc.

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2175 HUNTERFIELD ROAD MAITLAND FL 32751



 $\Gamma$ 

☐ Yes ☐ No

Fee Required

\$5.00 May Be

Added to Fees

5. Certificate of Status Desired

6. Efection Campaign Financing

Trust Fund Contribution

8. This corporation has fiability for intangible tax under s. 199.032, Zψ Zψ Country Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MORROW, CAROL Street Address (P.O. Box Number is Not Acceptable) 82 2175 HUNTERFIELD ROAD MAITLAND FL 32751

84	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above in or registered acent, or both, in the State of Fig. da. Such change was authorized by the corp.	named corporation submits this statement for the purpose of changing its registered office
familiar with, and accept the obligations of Section 607 0505. Florida Statistics	the did to begin of the easy the only the different of the angle of the

SIGNATURE .	gratia, typed pripints oracle of 6.5 times (Jettavistic)	Tankan Per	Tell Ricgoternot Agost signative regions	; which redistance (CATE		
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OF FICERS A	ND DIRECTO	RS IN 12
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CITY - ST - ZIP	MAITLAND FL 32751		1.4 CITY - \$1 - 767			
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STREET ADDRESS			6.3 STREET ADDRESS			

14. I do hereby certify that the information supplies with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 each; that I am an office or director of the couperation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes, and that my name

SIGNATURE:

CHTY - ST - 74P

ONW CAROL MORROW, PRES