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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP



FILED

May 06 1997 8:00am

Secretary of State

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Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000042955 (2) THE MAGICAL DOLPHIN GIRL PRODUCTIONS, INC.

| | | | | | | T HERHOUT HE LUKU COOK CONTY | | | |
|---|---|---|----------------------|-----------------------------------|--|--|-------------|--------------------------|-----------------------------|
| Principal Place of Business Mailing Address | | | | | | | | | |
| 1915 HARRISON HOLLYWOOD F | | 1915 HARRISON ST. HOLLYWOOD FL 33020-5 | 017 | | | | | | |
| | | | | | 3. Date incorporated or Qualified 06/03/1994 | 3a. Date of Last Report 05/01/1996 | | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | 2a. Mailing Address | | | 4. FEI Number | | TA | pplied For |
| 21 | | 26 | | | | NOT APPLICABLE Not Applicable | | | |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired \$8.75 Additional | | | | |
| 22 | | [27] | | | 6. Certificate of Status Dosned | | Fee R | equired | |
| City & State | e · | City & State | | | Election Campaign Financing \$5.00 May Be | | | | |
| 23 | | 28 | | | | Trust Fund Contribution | | | |
| Zφ | h | | ountry | | 8. This corporation has liability for intangible tax under s. 199.032, | | | | |
| 24 | 9. Name and Address of Current | [29] | [30] | | | Florida Statutes Yes No 10. Name and Address of New Registered Agent | | | |
| DOL | IGLAS K. BISCHOFF , ESQ. | r Hegisteren Agent | | R I | - Name | 10. Name and Address of New Ne | gistereu A | Bent | |
| | RGAN, LEWIS & BOCKIUS, LLP | | L. | | | | | · | |
| | S. BISCAYNE BLVD., SUITE 5300 | 1 | [4 | 82 | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| | WI FL 33131 | , | <u> </u> | В3 | | | | | |
| (MIN) | MI CE OO IO I | | [` | , | | | | | |
| | | | [4 | В4 | City | | E 1 | 85 Zip | Code |
| office or r agent 1 a | to the provisions of Sections 607,0500 registered agent, or both, in the State in familiar with, and accept the obligations Signature, typed or pointed hards of registered agent. | | | | | poration submits this statement for the p tion's hoard of directors. I hereby accep accommon translating | ot the appo | changing i intment as | ts registered registered |
| 12. | OFFICERS AND | DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | DIRECTO | RS IN 12 |
| .TITLE | PC DELE | | 1.1 101 | ŀ | \ | | | Change | Addition |
| NAME | RODGERS, THOMAS E JR. | | 1.2 NA | ME | | | | | |
| STREET ADDRESS | 1915 HARRISON ST | | 1.3 STR | EFT. | ADDRESS | | | | |
| CITY-ST-ZIP | HOLLYWOOD FL | | | 14 CHÝ - \$1 - 7 IP | | | | | |
| TITLE | T TOTAL TOTAL | DELETE | 21101 | 21 101.6 | | | i | Change | Addition |
| NAME | SHAPIIRO, ROBERT | | 2.2-NA | νŧΕ | | • . | | | |
| STREET ADDRESS | 1915 HARRISON ST | | 2.3 S1R | EFT. | ADDRESS | : | | | |
| OTY-ST-ZIP | HOLLYWOOD FL | | | 2. 4 C/TY - ST - Z/P 3.1 TO LE | | | | | |
| TITLE | S DELETE | | | | İ | | | Change | L_I Addition |
| NAME | KING, LAURA A 1915 HARRISON ST | 4E MARRICON OT | | | | | | | |
| STREET ADDRESS | HOLLYWOOD FL | | | | ADDRESS | | | | |
| CITY-ST-ZIP | D | DELLTE | 3 4, CH | | 1 - ZIP | | | Change | Addition |
| ance | MCKEAN, RANDOLPH | L. Detert | 4.1 1111 | | | | | | L'I MODIRON |
| NAME | 6401 S.W. 87TH AVE. | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | MIAMI FL | | 4.3 S1R16 | | ì | | | | |
| CITY-ST-ZIP TITLE | | | 4.4 DIT 5.1 \$110 | CITY-ST-ZIP | | | | Change | Addition |
| NAME | | LJ Mill | 5.1411C | | | | | Onlininge | CT) Vagation |
| • ' | | | | | ADDRESS | | | | |
| STREET ADDRESS | | | 53 BIR 54 DT | | ì | | | | l |
| CITY-ST-ZIP | ZIP DELETE | | | | 3 · ZII' | | · | Change | [] Addition |
| NAME | · · · | End wateric | 6.1 HIL 6.2 NAM | | | | ' | onungo | |
| STREET ADDRESS | - | | | | ADDRESS | | | | |
| A LLIEF LUMBER IF AND IT | 1 | | 4.00 | | | | | | , |

14. To hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Flurther 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 eath; 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 3 if changed, or on an attachment with an address.