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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P94000048343 (5) BACKSTREET PRODUCTIONS USA, INC. Principal Place of Business Mailing Address 2737 E OAKLAND PK BLVD #203 2737 E OAKLAND PK BLVD #203 FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306-1641 3. Date Incorporated or Qualified 3a. Date of Last Report 06/28/1994 10/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0500816 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032 24 29 Yes No 25 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DUBOIS, BURT J 22070 WOODSET WAY 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, 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 5 grande hyprolor product hank of registered agent and little if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6 DELETE TITLE 1.1 TITLE Change ■ Addition DUBOIS, BURT J NAME 1.2 NAME 22070 WOODSET WAY 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33433** CITY-S1-7IF 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change ☐ Addition 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 011Y - \$1 - 7iP 2. 4 CITY-ST-ZIP DELETE 11115 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS Cally-S1-20P 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City-ST-ZIP City - St - ZiP DELETE THUE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** Dity-S1-ZiP 5.4 CITY-ST-ZIP TITLE DELETE Change Addition 6.1 TITLE 6.2 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 6.4 CITY - ST-ZIP

14. I do 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 of director of the corporation or the receiver or trustee empowered to execute this report as required by Charles 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

49 954-563-640 Daylime Plione #