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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000048792 (3) DOCUMENT #

FILED Jan 16 1998 8:00am Secretary of State

	MATEC	CUMBE E	NTERTAINMENT,	INC.									
Pr	incipal Place	e of Busines	s	N	lailing Address				•	4 1061.061 (16 1611) 21011 20111 20111 20111	II WB *I7 BIB B	14111 18018	(8)(8)(8)(9)
83230 OVERSEAS HWY P.O. BOX 965						0.000	ne.						
ISLAMORADA FL 33036 US				ISLAMORADA FL 33036-0985					DO NOT WRITE I	IN THIS S	PACE		
										3. Date incorporated or Qualified			
	<u> </u>									06/27/1994			
	Principal Pl	ncipal Place of Business			2a. Mailing Address					4. FEI Number		<u> </u>	Applied For
21	Suite, Apt. #, etc.			26	Suito, Apt. #, etc.					65-0500878			Not Applicable
22	Suite, Apr. #, Bro.			27	27				5. Certificate of Status Desired			Additional Regulred	
24	City & State	city & State			City & State				6. Election Campaign Financing			0 May Be	
23	•				28				Trust Fund Contribution			d to Fees	
ŧ	Zip	Country			Zip Country				8. This corporation owes or has paid	d the curre	ent year I	ntangible	
24		25 29 30				,			Personal Property Tax due June 3			□No	
9. Name and Address of Current Registered Agent										10. Name and Address of New Reg	islered A	gent	
LEONARD, GERALD V							81	Name					
83201 OLD HWY							82	Street	Addres	s (P.O. Box Number is Not Acceptable	0)		
LONGWOOD FL 32779							83						
							84	City			FL	85 Zig) Code
11	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the a office or registered agent, or both, in the State of Florida, Such change was authorized.								corpor	ration submits this statement for the pu		LI changing	its registered
l ``	office or re	ogistored ag	ent, or both, in the Stat th, and accept the obli	e of Flori	ida Such change was	ed by	the cor	poration	n's board of directors. I hereby accept	the appo	intment E	is registered	
	. 0	TI IBRITINGI WI	in, and accept the obii	ganons c	II, 6000001 007.0003, I	rionaa ate	nutea	э.					
S	GNATURE :	Signature typed	or printed name of registered a	gent and title	e d'applicable (N	D1E: Register	ed Age	nt signatur	e required	when reinstating)	DATE		
12		OFFICERS AND DIRECT								ADDITIONS/CHANGES TO OFFICE			
ŦIT	LE	P CENTRAL OFFICE			☐ DELETE			1.1 TITLE			1	Change	Addition
NA	ME	LEONARD, GERALD SECONDARD SERVICE ROAD					1,2 NAME			159 NAJATA ST	-		
STI	REET ADDRESS							ADDRESS	, ,	ISTNAVAJO ST AVERNIER Fl 3.	*> ~ 7 >		
	Y-ST-ZIP		100D FL 32779		DILETE		ITY-S	1-2IP	17	AVERNIER FI 3.	30/0	Change	Addition
TIT		VTS LEONARD, ARLOWINE M			ןן טוננונ	DELETE 2.1 1110 2.2 NAI						•	L_J Addition
NAI	1		KIVA COVE ROAD					****	ے, ا	MANAJO ST VERNIER, Fl 3			
	REET ADDRESS		00D FL 32779					ADDRESS	73	Japan El 3	311	.	
TIT	Y-ST-ZIP	LUITON	COD I E VEITE		DELETE	2. 4 t	CITY - S) I - ZIF	1/H	VUNGUIUK, I I 3	007	Change	Addition
NA!	1						IAME				•		
	REET ADDRESS							ADDRESS					
_	Y-ST-7IP						CITY-S						
tit					DELETE	4 1 T			1		Ι	Change	Addition
NAI	ME					4.2	NAME		1				
STE	REET ADDRESS					435	STAFET	ADDRESS					
CIT	Y-ST-ZIP					4.4 0	HY-S	1 - 71P	ļ <u>.</u>				<u> </u>
TIT	LE				☐ DELETE	5.1 T	IILE				Ţ	Change	☐ Addition
NAI	ME					5.2 N	IAME						
STE	REE1 ADDRESS					5.3 9	TREET	ADDRESS					
	Y-ST-ZIP						ITY-S	1 - ZIP	ļ		ور الناس الح	пз.	
TITI					☐ DEFETE	6.1 7				10000240 -01/20/980106 ***150.00	ተተ (id 1 በጋ	s j j i:hange C	☐ Addition
NA							IAME			###1£U UU ###1£U UU	102	р (У Д	[
STREET ADDRESS							6.3 STREET ADDRESS 6.4 CHY+S1+ZIP			***100.00		VV	1-16
CIT	Y-ST-7#*					6.4 0	:11Y - S	1 - Z (P	1 .				''D

14. I heroby certify that the information supplied with this filing closs 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 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 13 if changed, or on an attachment with an anidress