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 # **P94000057258**1. Corporation Name

TAYLOR-MADE PRODUCTIONS, INC.

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90075 026 ***150.00



	•							1) P 1811 1811
Principal Place	e of Business	Mailing Addre	ess		•	1 (AB) (Ab) (Ab) (Ab) (All (All (All (All (All (All (All (Al		9mg) 19M 1881
14843 SW 110TH TER 14843 SW 110TH TER						•		
MIAMI FL 33196 MIAMI FL 33196			X6			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed	, o. r.o.	
						08/03/1994		
2. Principal Pl	lace of Business	2a, Mailing A	ddress		-	4. FEI Number	App	olied For
21		26				65-0519208	Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			. #, etc.				\$8.75 A	
22 27						5 _Certificate of Status Desired .	Fee Re	quired
City & State City & State			ite			6. Election Campaign Financing	\$5.00	
23 28			,—————————————————————————————————————			Trust Fund Contribution	Added to	o Fees
Zip	Country Zip		Country		8. This corporation owes the current year Ir		□No	
24	25	29	30	<u> </u>		Personal Property Tax. 10. Name and Address of New Registered		□N0
	9. Name and Address of Curre	nt Registered Age	nt	81	Name	10. Name and Address of New Registered	Agein	
МАЯ	K TED M			Ľ				
MARK, TED M 14843 SW 110TH TER				82	Street Addr	ess (P.O. Box Number is Not Acceptable)		j
MIAMI FL 33196				83				
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 2 33 133							
				84	City	FI	85 Zip C	Code
44 Purguent	to the provisions of Sections 607.05	02 and 607 1508 F	lorida Statutes	the above	-named come	oration submits this statement for the nurnose of	= f changing its	registered
office or n	egistered agent, or both, in the State	of Florida. Such ch	ange was autho	orized by	the corporation	on's board of directors. I hereby accept the appoint	intment as reg	gistered
agent. 1 a	m familiar with, and accept the oblig	ations of, Section of	07.0505, Florida	Statutes	,	4/13/9	19	1
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable.	(NOTE: Rec	istered Age	nt signature require	d when reinstating) DATE		
12.		ND DIRECTORS	, , , , ,	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	D		DELETE	1,1 TITLE		S 5	Change	☐ Addition
NAME	MARK, TED M	•		1.2 NAME				
STREET ADDRESS	14843 SW 110TH TER			1.3 STREE	T ADDRESS	•		
CITY-ST-ZIP	MIAMI FL 33196			1.4 CITY-S	T-ZIP	<u> </u>		
πιε] DELETE	2.1 TITLE			Change	Addition
NAME				2.2 NAME				f
STREET ADDRESS		A	•	2.3 STREE	TADDRESS	والمعالم والمعالم والمعاصر والمعاصر	• •	
CITY-ST-ZIP	:			2. 4 CITY-5	T-ZIP		C Channe	Addition
TITLE		L] DELETE	3.1 TITLE			Change	- Addition
NAME			•	3.2 NAME				ļ.
STREET ADDRESS					TADDRESS			ţ
C/TY-ST-ZIP			DELETE.	3.4. CITY-5	ST-ZIP		[] Change	Addition
TITLE		Ĺ] DELETE	4.1 TITLE				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
NAME				4. 2 NAME				{
STREET ADDRESS					TADDRESS			ţ
CITY-ST-ZIP			DELETE	4.4 CITY-S 5.1 TITLE	T-ZIP		Change	Addition
TITLE		L	Dereie	5.2 NAME			change	
NAME								
				1 5.3 STRFF	LADURESS			
STREET ADDRESS				5.3 STREE				
CITY-ST-ZIP			1 DELETE	5.3 STREE 5.4 CITY-S 6.1 TITLE			☐ Change	Addition
CITY-ST-ZIP	`		DELETE	5.4 CITY-S			☐ Change	Addition
CITY-ST-ZIP	Section 1		DELETE	5.4 CITY-S 6.1 TITLE 6.2 NAME			☐ Change	Addition

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 jequired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #