

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000081591 (7)

1. Corporation Name

MOTION GRAPHICS, INC.



Principal Place of Business

4929 N BUFFALO DR
BEVERLY HILLS FL 34465

Mailing Address

4929 N BUFFALO DR
BEVERLY HILLS FL 34465

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

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9. Name and Address of Current Registered Agent

MIRABILE, SANTO
4929 N. BUFFALO DRIVE
BEVERLY HILLS FL 34465

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.01(4) and 607.15(4), 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 made by the corporation on 03/28/1996. The only change to the appointment of registered agent, I am familiar with, and accept the obligation of, Section 607.01(4), Florida Statutes.

SIGNATURE

Santo Mirabile, Secretary of State

Santo Mirabile, Secretary of State

12. OFFICERS AND DIRECTORS

TITLE D [] DELETED

NAME MIRABILE, SANTO
STREET ADDRESS 4929 N BUFFALO DR
CITY-STATE-ZIP BEVERLY HILLS FL 34465

TITLE D [] DELETED

NAME MIRABILE, JARED
STREET ADDRESS 4929 N BUFFALO DR
CITY-STATE-ZIP BEVERLY HILLS FL 34465

TITLE [] DELETED

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13.

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-STATE-ZIP

5. PHONE

6. FAX

7. E-MAIL ADDRESS

8. OTHER ADDRESS

9. OTHER ADDRESS

10. OTHER ADDRESS

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition

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14. I do hereby certify that the information supplied to the filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(c), Florida Statutes. I further certify that the information is complete and correct, 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, and the name of the corporation is correct. I am not a resident of the State of Florida, and that my name appears in Block 12 or Block 13 if changed, or on an affidavit with my address.

SIGNATURE: Santo Mirabile

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/96 (352) 746-0741

CR2E034 (12/95)