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

PROFIT CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

indicated on this annual report of officer or director of the corpora Block 12 or Block 13 if change

Suite, Apt. #, etc.

City & State



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P94000081957 (0)

ENCANTA PRODUCTIONS, CORP.

Principal Place of Business Mailing Address 2555 COLLINS AVE SUITE 806 2555 COLLINS AVE MIAMI BEACH FL 33140 MIAMI BEACH FL 33140

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27

2a. Mailing Address

City & State

Suite, Apt. #, etc.

FILED Feb 23 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified <u>11/08/1</u>994 4. FEI Number

65-0549228

5. Certificate of Status Desired

6. Election Campaign Financing

09/17/08

Trust Fund Contribution

Zip	ļ	Country	Zip		Cor	ıntry		8. This o	corporation o	wes or has			r Intar	ngible	
24		25	29		30			Perso	Personal Property Tax due June 30. 💹 Yes 🔲 N					No	
	g, Name	and Address of Current		10. Name and Address of New Registered Agent											
GOLDBERG, GABRIEL							Name								ł
2555 COLLINS AVENUE							Street	Address (P.O. Box Number is Not Acceptable)							ᅱ
SUITE 806															
MIAMI BEACH FL 33140															-
						84	City					85	Zip Co	de	
						**	City				FL	. 65 1	Lip Ci	Jub	
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.															1
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulated when reinstating) DATE															.
40	Signature, typed	or printed name of registered agen OFFICERS AND		olo. (NOTE		d Age	nt signature		^{ing)} IONS/CHAN(OCO TO OCI	DATE	V DIEC.	TODO	(N) 10	F
12.	DPS	OFFICERS AND	DIRECTORS	DELETE	13.	TI E		ADDIT	IONS/CHAIN	GES TO OFF	TICEHS AND	Chan		Additio	
NAME	GOLDBERG, GABRIEL				1.2 N		- 1						go.	ROOMO	- 1
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	MIAMI BEACH FL 33140						1								ļ
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NAME				La Petere	6.2 N/		İ					الله الله	9-		1
							IDDOCCC								1
STREET ADDRESS							ADDRESS								1
CITY-ST-ZIP	certify that the	information euoplied with	this filing do	es not qualify for	6.4 CI			d in Section 119	07(3\(i) Flor	da Statutes	I further ce	rtify that	the in	formation	\dashv
indicated officer or	on this annui	e information supplied with all report of supplier iental a corporation or the receive	annual report ver br trustee o	is true and accu empowered to e	urate and execute t	tha his r	t my sigi eport as	nature shall have required by Cha	the same le	gal effect as rida Statutes	if made un	der oath ny name	that appe	am an	