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

**PROFIT** CORPORATION ANNUAL REPORT

1998

2963 SW 22ND TERRACE

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FLORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P94000084422 (2) DOCUMENT #

SOUTH POINT STUDIOS, INC. Principal Place of Business Mailing Address

2963 SW 22ND TERRACE MIAM! FL 33145

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**FILED** 

Apr 22 1998 8:00am

Secretary of State

MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/16/1994 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For 65-0569237 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PAUCAR, CARLOS E 2963 SW 22ND TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33145** 83 84 City Zip Code

11. Pursuant to the provisions of Sections 607.05.02 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 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

se of registorest agent and the if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE TITLE 1.1 Title Change Addition PAUCAR, ANTONIO N NAME 1.2 NAME 1805 LAKESHORE CIRCLE 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33326 14 CHY-ST-ZIP CITY-ST-ZIP Change DELETE 21 THILE Addition TIFLE PAUCAR, CARLOS E NAME 2 2 NAME 1805 LAKESHORE CIRCLE STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL 33326 CHY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TITLE PAUCAR, MANUEL A NAME 3.2 NAME 1805 LAKESHORE CIRCLE STREET ADURESS 3.3 STREET ADDRESS FT. LAUDERDALE FL 33326 CITY - ST - 7IP 3.4 CHTY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-\$1-7IP DELFTE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CHY-SI-7P

14. Thereby certify that the information supplied vindicated on this annual report. A upplement officer or direction of the corp ration or the Block 12 or Block 13 if charged or on a gain. t qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information e and accurate and that my signature shall have the same legal effect as if made under oath; that I am an were to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

**SIGNATURE:** 

(303)447-0071