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

PROFIT CORPORATION ANNUAL REPORT



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

## 1996

DOCUMENT # P94000087580 (4)

FIRST FLIGHT ENTERTAINMENT, INC.
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•												
Principal Place	of Business		Mailing	Address				<b>                             </b>	<b>   </b>			i folili <b>og</b> if 1004
301 YAMATO RD. SUITE 1180 BOCA RATON FL 33431			301 YAMATO RD. SUITE 1180 BOCA RATON FL 33431									
							3. Date Incorporated or 12/02/1994	Qualified	3a. Date of Last Report 03/07/1995			
2. Principal Pla 21		S	2a. Mai 26	ling Address				4. FEI Number 65-0545856				Applied For Not Applicable
Suite, Apt. 4 22 SUI	#, etc. TE # 31	98	Suit	e, Apt. #, etc. SUITE #	3198			5. Certificate of Status	Desired		•	Additional Required
City & State	y & State			City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip <b>24</b>	2	Country 5	7p	V 110 11 146 . de	Countr	У		8. This corporation has Florida Statutes	liability for in		<del> </del>	
	9, Name a	nd Address of Current	Registered	J Agent			,	10. Name and Address	of New Re	gistered Ag	ent	
;					81	1	Name Mo	rris Stoltz		· <del>·</del>		
	ENCER M.				82	1.		ess (P.O. Box Number is No Palmetto Park	t Acceptable	On de a	212	
• .	IATO RD.				83	+	7000 W	raimetto Park	Road,	Suite	212	
, SUITE 41					0.	'	MA	(is //	21			
י טטטא וע	ATON FL 33	431			84	1	Çity Boca R	aton.	-74-		85 <i>71</i> 0	3434°
11. Pursuant to	o the provision	is of Sections 607,0502 a	nd 607.150	)8. Florida Statute	s. the above	.L -na	amed corpor	ation cultimite this statement	for the our	rose of chance	ing ito re	asistared office
• Or register	ou agent, or ot	zur, in trie otate of righta	- Such Chai	nge was attitionze	d by the con	poi	ration's boar	d of directors. I hereby acce	pt the appoi	intment as re	gistered	agent. Lan
familiar with, and accept the obligations of, Section 607.0505, Florida Statules.  SIGNATURE MCV.NIS L SZOCIZ TJ. WAY 13 1996												
	Signature, typed or	printed name of registered agent an	· <del></del>		Tiogistered Age	ent :	signature recipios	when reinstallig		DATE		
12. TITLE		OFFICERS AND	DIRECTOR	S DELETE	13.		T	ADDITIONS/CHANG	S TO OFFIC			
NAME				occur	1. 1 TITLE 1.2 NAME		Pr Mo	esident Tris Stoltz		-	Change	X Addition
STREET ADDRESS					1.3 STREE		170	000 W. Palmetto	Park	Rd, Sui	te 2	212
CITY-ST-ZIP					1.4 CHY-		Bc	ca Raton, FL	33434			
TITLE	· · · · · · · · · · · · · · · · · · ·			DELETE	2 1 TITLE			ce-President		82	Change	Addition
NAME					2.2 NAME			rk Guzzetta		- Constant		
STREET ADDRESS					2.3 STREE	LA		l Yamato Road,	Cuiten	2100		
CITY-S1-ZIP					2 4 CITY-	ST-	-2IP BO	ca Raton, FL	33/31	3130		
TITLE				DELETE	3 1 TITLE		Se	cretary/Treasu			Change	Addition
NAME					3 2 NAME			ck Bimonte	101			
STREET ADDRESS					3.3 STREE	ET A		55 Glades Rd,	Suite	1284		
CITY-ST-7IP				ET DELEKT	3.4 CITY -		-21Р Во	ca Raton, FL	33431			
TITLE				DEFELE	4. 1 TITLE			,		Ш	Change	Addition
NAME STREET ADDRESS					4.2 NAME							
CITY-ST-ZIP					4.3 STREE			30000	1100		•••••	
TOLE		— — — — — — — — — — — — — — — — — — —		[] DELETE	4.4 CITY- 5.1 TITLE		- 2)P	-0572479		105 ( ) (0) 106 100	Channa	Addition
NAME					5 2 NAME			***200.0	N) 010	ACO UAI	Min.ige	
STREET ADDRESS					5 3 STREE		LOORESS		~			
CITY-ST-ZIP					5.4 CHY-							
TITLE				DELETE	6 1 TITLE						Change	Add tion
NAME					6 2 NAME							
STREET ADDRESS					63 STREE	l A	LODRESS					
CITY-ST-2IP					64 CITY-	ST-	- ZIP					
14. I do hereby certify that oath; that I appears in	y certify that th the information I am an officer Block 12 or B	e information/supplied wit n indicated on this annual or director of the corpora look 13 if manged, or op	h this filing report or s tion or the i on attactor	is voluntarily furnis upplemental annu- recipies or trustee lept with an addre	shed and do al report is tr empowered ass.	es ue to	not qualify for and accurat execute this	or the exemption stated in Sate and that my signature sha se report as required by Chap	action 119.0 Il have the s Iter 607, Flor	7(3)(k), Floridi ame legal effi ida Statutes;	a Statute act as if and tha	es. I further made under it my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAGO OFFICER OR DIRECTOR

407-197-65 Dading Ph A de