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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000088014 (3)

LOOKING-GLASS PRODUCTIONS, INC.

Mailing Address Principal Place of Business 3100 NE 47TH COURT, SUITE 403 3100 NE 47TH COURT, SUITE 403 FT. LAUDERDAKE FL 33308-5360 FT. LAUDERDAKE FL 33308 3. Date Incorporated or Qualified 3a. Date of Last Report 10/07/1996 12/05/1994 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0573957 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country This corporation has liability for intangible tax under s. 199.032, Zip Country Yes No Florida Statutes 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TRUNK, DANIEL J 3100 NE 47TH COURT Street Address (P.O. Box Number is Not Acceptable) STE. 403 83 FT. LAUDERDAKE FL 33308 RA Zio Code

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.

(NOTE: Registered Agent signature required when reinstating) Signature, typed or princed name of registered agent and title if applicable (96/6) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE THEE TRUNK, DANIEL J 1.2 NAME NAMA 3100 NE 47TH COURT, SUITE 403 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDAKE FL 33308 1.4 CITY - ST - ZIF CHY-S1-ZIP Change \_\_\_ Addition DELETE 2.1 TITLE THILE 2.2 NAME N.M. 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZIP DELETE \_\_\_ Change L Addition 3.1 TITLE TIME 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4 1 TiTLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition 5.1 TITLE THE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CHTY-ST-74P DELETE Change Addition 6.1 TITLE THE NAME 6.2 NAME 6.3 STREET ADDRESS STREET AUDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIF

14. If do 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 required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, if gn an attachment with an address.

SIGNATURE:

MANATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/97

Daytime Phone #

**FILED** 

May 09 1997 8:00am

Secretary of State