


FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90199 020 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000091209

1. Corporation Name

TEHA PRODUCTIONS, INC.

Principal Place of Business

402 OLD MILL POND ROAD
PALM HARBOR FL 34683

Mailing Address

402 OLD MILL POND ROAD
PALM HARBOR FL 34683

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/15/1994

4. FEI Number

59-3293208

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax.☒ Yes☐ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

SANDBERG, THERESA
402 OLD MILL POND ROAD
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

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 607.0502 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PSD PRESIDENT/TREASURER ☐ DELETE

NAME

SANDBERG, THERESA

STREET ADDRESS

402 OLD MILL POND ROAD

CITY-ST-ZIP

PALM HARBOR FL 34683

TITLE

HARRISON ARNSTON DECEASED ☒ DELETE

NAME

402 Old Mill Pond Rd

STREET ADDRESS

Palm Harbor, FL 34683

CITY-ST-ZIP

Palm Harbor, FL 34683

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

VPT Vice President/Secretary ☐ Change ☒ Addition

1.2 NAME

Karon GRACE

1.3 STREET ADDRESS

8210 14th Avenue Apt 66

1.4 CITY-ST-ZIP

Brooklyn NY 11214

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Theresa SANDBERG, Pres

4/13/99

727 934-1226

Daytime Phone #

CR27034 (11/98)