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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000093004 (7)

THE FLORIDA FILM INVESTMENT COMPANY Principal Place of Business Mailing Address 7238 HIAWASSEE OAK DRIVE 7238 HIAWASSEE OAK DRIVE ORLANDO FL 32818 ORLANDO FL 32818 3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1995 X Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 59-3286615 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution 23 Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, Ζφ Country Florida Statutes Y Yes No

10. Name and Address of New Registered Agent 24 25 29 30 9. Name and Address of Current Registered Agent 81 TIJORIWALA, ANIKUMAR G 82 Street Address (P.O. Box Number is Not Acceptable) 2950 ALOMA AVENUE 83 SUITE 305 WINTER PARK FL 32792 84 City 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 Fiorida. 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. (12/95)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE ☐ Change ☐ Addition TITLE MORNINGSTAR, CAROLANNE 1.2 NAME CR2E034 NAME 7238 HIAWASSEE OAK DRIVE 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32818 CITY-ST-ZIP 1.4 CITY - ST-ZIP Addition DELETE ☐ Change TITLE 2 1 TITLE NAME 22 NAME STREE! ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST-ZIP DELETE Change Addition TITLE 3. 1 TOTLE 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY - ST- ZIF Change DELETE 4.1 TITLE ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP ☐ DELETE ☐ Addition 5 1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6 1 TITLE 62 NAME STREET ADDRESS **63 STREET ADDRESS** 64 CITY-ST-ZIP CITY - ST - 7IP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

ANATURE: (AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTO

Apr 15, 1996

407/292-7458