SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002299 (2) 1. Corporation Name ON THE \$POT PRODUCTIONS, INC.									A CONTRACTOR OF THE CONTRACTOR	TO A TOP A STATE OF THE STATE O	Talia irtiā elālā la	IIJ e J e ti 1821	
 €	incipal Place 505 CONTEN 50CA RATON	IPO LANE	S	6505	Mailing Address 6505 CONTEMPO LANE BOCA RATON FL 33433				DO NOT WRITE IN THIS SPACE				
									3.	Date Incorporated or Qualif 01/10/1995		Date of Last R 05/01/1996	
	2. Principal Place of Business			<u> </u>	2a. Mailing Address				4.	FEI Number			plied For
21	Suite, Apt. #, etc.			26 Si	Suite, Apt. #, etc.					65-0542836		\$8.75 /	t Applicable
22	<u> </u>			27	<u> </u>				5.	Certificate of Status Desired		Fee Re	
	City & State	ity & State			City & State				6.	Election Campaign Financin		\$5.00	
23	Zip	Country			Zip Country				-	Trust Fund Contribution This corporation owes or ha	c paid the	Added t	
24		25			29 30				_	Personal Property Tax due	June 30.	Yes [No
			and Address of Cu	rrent Register	ed Agent		91		10.	Name and Address of Nev	v Registere	d Agent	
FRIEDMAN, GIG 6505 CONTEMPO LANE								Name					
BOCA RATON FL 33433							B2	Street Addre	ess (P	O. Box Number is Not Acce	ptable)		
							83		_				
							84	City				. 85 Zip (Code
L								<u> </u>			<u>F</u>		
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 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 api agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											of changing it ppointment as	s registered registered	
	_	m førnillar wi	in, and accept the o	bligations of, Se	90)10N 607.0505; }	-lorida Statu	tes.						
							Agen	it signatute require			DATE		
12		-p	OFFICERS	AND DIRECTO	DRS DELETE	13.	r	··		ADDITIONS/CHANGES TO O	FFICERS A	ND DIRECTOR Change	S IN 12
l	FRIEDMAN, GIG							1,2 NAME				Onlings	
ŀ	STREET ADDRESS 6505 CONTEMPO LANE				Ī		1.3 STREET ADDRESS						
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ı	REET ADDRESS							ADDRESS					
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STREET ADDRESS						6.3 STREET ADDRESS							
l en	V_CT_7/D					6.4 DITY	/. CT.	. 7iD					

14. I 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 supplying that an 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 refere of 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 hanged, or opposition of the corporation of the corporation

CHATTER STATE MILL A B. D. FORESTA

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FILED

Sep 12 1997 8:00am

Secretary of State