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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90058 032 ***150.00

DOCUMENT # P95000002828

MARTIN & DONALDS TALENT AGENCY, INC.

Principal Place	e of Business	Mailing Address]) (49)(44) (58 (8)8) E)		17207 7571 1041
1915-A HOLLYW	VOOD BLVD	1915-A HOLLYWOOD BLVD							
	HOLLYWOOD FL 33020 HOLLYWOOD FL 33020			DO MOT MIDITE IN THIS SPACE					
US US			DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed						
						11/1995			
2. Principal Place of Buşiness A C . A 2a. Mailing Address			1 (2) 1		4. FEI Number			, Ap	plied For
21 a (3)	Hollywood Blod.	26 2131 HILLUMA	od Blud	•	65-	0549289			t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 St. 306			•		5. Certi	fcate of Status D	esired	\$8.75 A	1
City & State City & State City & State City & State City & State			6. Election Campaign Financin Trust Fund Contribution				\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country	<u> </u>	8. This	corporation owes	the current year	ntangible	
24 330	`ao	29 33020 30	3 $US/4$	·	Pers	onal Property Ta	x	X Yes	□No
	9. Name and Address of Current	Registered Agent			10. Nam	e and Address	of New Registere	d Agent	
	~m. 0114B011		81 Nan	ne				,	1
	itin, sharon 5-a hollywood blvd		82 Syp	et Addrei		ox Number is 110	(Acceptable)		
HOL	LYWOOD FL 33020		83	ــــــــــــــــــــــــــــــــــــــ	Linidi	WOOK. U	1 V & :	· · ·	
			5	te :	306 \				
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11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes,	the above-nam	ed corpor	ration sub	nits this stateme	nt for the purpose	of changing its	registered
agent la	to the provisions of Sections 607.0502 egistered agent, or both, in the State of a familiar with end account the obligation	ons of, Section 607.0505, Florid	a Statutes.	rporation	s board o	directors, i nere	by accept the app	:	gistered
SIGNATURE	May Make	m)	Sharan Fl	$t_{\gamma \kappa}$ n	ìn	8	/1a/0	19	1
SIGNA PUBL	Signature, typed or printed name of registered agent		gistered Agent signatu	ire required v			DATE		
12.	OFFICERS AND		13.	1	ADDI	TIONS/CHANGE	S TO OFFICERS		
TITLE	D	☐ DELETE	1.1 TITLE					Change	☐ Addition
NAME	MARTIN, SHARON	•	1.2 NAME	1 1 1 1	631	5.W. 41	street		
STREET ADDRESS	358 N.E. 94TH ST.	ļ	1.3 STREET ADDRE	~ I			33027		J
CITY-ST-ZIP	MIAMI SHORES FL 33138		1.4 CITY-ST-ZIP	111/	rama	r, FL	<u> </u>	Change	Addition
TITLE	D COMMUNICATIONS	☐ DELETE	2.1 TITLE					☐ Change	☐ Addition
NAME	DONALDS, CHRISTINE		2.2 NAME						1
STREET ADDRESS	630 N.W. 206TH AVE.		2.3 STREET ADDRE	SS					ļ
CITY-ST-ZIP	PEMBROKE PINES FL 33029		2.4 CITY-ST-ZIP				<u></u>		- Addition
TITLE		☐ DELETE	3.1 TITLE	ĺ				Change	☐ Addition
NAME			3.2 NAME			-		•	
STREET ADDRESS			3.3 STREET ADDRE	ss					
CITY-ST-ZIP			3.4. CITY-ST-ZIP					Поь	□ Addition
TITLE		☐ DELETE	4.1 TITLE					☐ Change	☐ Addition
NAME			4, 2 NAME						}
STREET ADDRESS			4.3 STREET ADDRE	ss				,	1
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	5 1 TITLE			•		Change	☐ Addition
NAME			5.2 NAME					•	
STREET ADDRESS			5.3 STREET ADDRE	SS					1
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		☐ DELETE	6.1 TITLE					Change	☐ Addition
NAME		•	6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRE	SS					}
CITY-ST-ZIP			6.4 CITY-ST-ZIP						1

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: