

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 # P95000009917 (2)

1. Corporation Name

DARKHORSE STUDIOS, INC.

Principal Place of Business

616-D 18 STREET CT. E
PALMETTO FL 34221

Mailing Address

616-D 18 STREET CT. E
PALMETTO FL 34221-3358

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 29 30 9. Name and Address of Current Registered Agent

PAULSON, LARS
616-D 18 STREET CT. E
PALMETTO FL 34221

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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 type for protection of privacy is not required for this filing.

(NOTE: If you are a corporation, please include the name of the officer.)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME PAULSON, LARS
STREET ADDRESS 616-D 18 ST. CT. E.
CITY-STATE-ZIP PALMETTO FL 34221

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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13.

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY-STATE-ZIP
19 TITLE
20 NAME
21 STREET ADDRESS
22 CITY-STATE-ZIP
23 TITLE
24 NAME
25 STREET ADDRESS
26 CITY-STATE-ZIP
27 TITLE
28 NAME
29 STREET ADDRESS
30 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

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 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 or changed or on an adjustment with an address.

SIGNATURE

Lars Paulson

3-14-97

941-721-0708

FILED
Mar 18 1997 8:00am
Secretary of State



3. Date Incorporated or Qualified

02/10/1995

3a. Date of Last Report

03/19/1996

4. FLE Number

65-0555176

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 Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

[]

Yes

[]

No

10. Name and Address of New Registered Agent

CR2E034 (9/96)