## 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

## DOCUMENT # P95000016842

Corporation Name

NEW RIVER POST PRODUCTION, INC.

Principal	Place	of Business

Mailing Address

408 S. ANDREWS AVE., STE. 104 FT. LAUDERDALE FL 33301

408 S. ANDREWS AVE., STE, 104 FT. LAUDERDALE FL 33301

## **FILED** Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90027 049 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

							3	Date Incorporated or Qua 02/27/1995	alifed				
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2. Principal Plac	of Business 2a. Mailing Address				4	65-056 <u>7589</u>		,	Not A	pplicable	031402		
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4]	9. Name and Address of Current		gent				1	<ol><li>Name and Address of</li></ol>	New Regi	stered A	gent		l
	9. Name and Address of Current	3 3 3 3 7 3 4	17:	1	81	Name		Ç.					į.
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agent. I an	o the provisions of Sections 607.0502 gistered agent, or both, in the State of n familiar with, and accept the obligation Signature, typed or printed name of registered agent	ons of, Section	III 607.0303, 1 lone	<b>U</b> 0.0.0				han minetaling)	· <del>· · · · · · · · · · · · · · · · · · ·</del>	DATE			
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14. I hereby certify that the information supplied with this filing does not indicated on this annual report or supplemental annual report is to officer or director of the corporation of the receiver or trustee employer 12 or Block 13 if changed on an attachment with an additional control of the corporation of the receiver or trustee employer 12 or Block 13 if changed on an attachment with an additional control of the corporation of the receiver or trustee employers. lainy for the exemption stated in Section (18.07(3)(i), Filonial Statutes, Filinite Certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in with all other like empowered.