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 # P95000029748 (7)

97 JUL 29 AM 8: 35

SECREMARY OF STATE
TALLARASSEE FLORIDA

Park Transition Co.

AOUA-B	BLUE PRODUCTIONS INC.	` •		IMETER)	(hiterative) is made and the
AQUAT	PLUE PRODUCTIONS INC.			f 18811821 JIN 18181 EJISA 86111 881111	NUMBER OF STREET STREET FOR STREET STREET STREET
Principal Place	e of Business	Mailing Address		1 100111001 110 10101 01111 00111 00111 00111	
141 N.S. 3RD	AVE.	141-N.E. GRD AVE:			
#205- MIAMI FL 93182 #MAMI FL 93132				DO NOT WRIT	TE IN THIS SPACE
MINMITE-00TI	WZ	MININETE 33132		3. Date Incorporated or Qualified	
				04/17/1995	03/25/1996
	ace of Business	2a. Mailing Address	^	4. FEI Number	Applied For
21 2040	9 NE 10 CT RD.	26 141 NE 3R	o HUE	65-0573954	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		27 9+# LOOK City & State	<u>′</u>		Fee Required
23 MIAN		28 MiAmi F	١.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	This corporation owes or has particular to the second contribution.	
24 33.17			DADE	Personal Property Tax due Jur	ne 30. Yes 🗌 No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New F	legistered Agent
GA	STRO; ANDRE		81 Name	IL BUSINESS LEC	201
GASTRO, ANDRE 141 N.E. 3RD AVE. 81 Name & L 182 Street Addres				Juress (r.O. Dox Nulliber is Not Accept	able)
#20			141	NG BRD AVE	<u> </u>
AIM-	MI FL 89192		83 9TH	FLOOR	
)			84 City	· · · · · · · · · · · · · · · · · · ·	FL 85 Zip Code おもりきむ
44 Durayant	to the provinces of Sections 607 05/	22 and 607 1509 Etorida Clatutor	the above parred or	I Ami	Purpose of changing its registered
office or r	egistered agent, or both, in the State	of Florida. Such change was au	thorized by the corpo	orporation submits this statement for the oration's board of directors. I hereby acc	ept the appointment as registered
	m ramiliar with and account oblig	pations of, Section 607.0505, Fior	ida Statutes.	·	7/21/97
SIGNATURE	monature, typed or printed name of registered ag	ent and title if applicable (NOTE:	Registered Agent signature re	quired when reinstating)	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	
TITLE	PSD-	N □ DELETE		3D	Change Addition
NAME	CASTRO, ANDRE	\mathcal{A}	1.2 NAME	CASTRO, ANDRE 20409 NE 10CT Rd.	
STREET ADDRESS	%-141-N.E. 8RD AVE. #205/		1.3 STREET ADDRESS	MADE OF THE PARTY	
CITY-ST-ZIP TITLE	MIAMI FL 33192	DELETE		MIAMI FL 38179	Change Addition
NAME	NICARETTA, VERA L		2.2 NAME	NICARETTA, VERA L	- Change - Notice
STREET ADDRESS	% 141 N.E. 3RD AVE. #205		2.3 STREET ADDRESS	20409 NE 10CT RO	L
CITY-ST-ZIP	MIAMI FL 33132		2.4 CITY-ST-ZIP	MIAMI A 38.179	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. C(TY - ST - Z(P		
TITLE		L DELETE	4.1 THTLE		☐ Change ☐ Addition
NAME			4. 2 NAME	SUUUC MANUE	257445B
STREET A DRESS			4.3 STREET ADDRESS	単来来報1	65.00 ****165.00
CITY-ST-UP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME		₽ occent	5.2 NAME		The Amenika Fit industrial
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZiP			6.4 CITY - ST - ZIP		

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 if changed, or on an attachment with an address.

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Dear Sir/Ms.:

Per instructions from the Division of Corporations, I am attaching a check in the amount of \$165.00 for the Annual Report fee.

I also state that I have not received the first notice from the Division of Corporations.

Thank you for your courtesy in this matter.

President