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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000036762 (9)

FRANKENEGG PRODUCTIONS, INC.

FILED May 04 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						ANNORU ROB ROBEN BARIL BERILL DELIT ER		8848 84418 1181 1881	
2453 WHISPERING MAPLE DR. 2453 WHISPERING MAPL ORLANDO FL 32837 ORLANDO FL 32837			DR.						
				DO NOT WRITE IN THIS SPACE					
						ncorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address					4. FEI No	08/1995 Imber		Januar -	
21	26					-3443149	<u> </u>	Applied For Not Applicable	
Suite, A	Suite, Apt. #, etc. Suite, Apt. #, etc.						□ \$8.	75 Additional	
22	27					cate of Status Desired	1 1 7 7	ee Required	
	ty & State City & State				6. Election	on Campaign Financing		.00 May Be	
23 Zip	28 Country Zip Cou			 ,	Trust Fund Contribution				
24	<u>├-</u> ¬ ′	25 29 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
	WHITACRE, WILLIAM L ESQ.		81	Name		<u></u>			
17 S. MAGNOLIA AVE.				Street	Address (P.O. Box Number is Not Acceptable)				
ORLANDO FL 32801						r racinos la racinocopias			
			83						
			84	City			 85	Zip Code	
#4 Pureup	ent to the provisions of Soctions CO.T.	2502 and 607 1500 Flavida Ctat.		<u> </u>			FL °°		
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.									
SIGNATUR			<u>-</u> .					}	
				ent signaturi	e required when reinstating	•	DATE	27070 11 40	
TITLE	NY III		1.1 TITLE		ADUITR T	ONS/CHANGES TO OFFIC	ERS AND DIREC		
NAME	TANTALO, PATRICA A		1.2 NAME		TAUTALA	S 20 No. 14		inge C Pidoliton	
STREET ADDRESS %2453 WHISPERING MAPLE DR.			1.3 STREET ADDRESS		WALL NEW	Patrick	A .		
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP						
TITLE	V\$						☐ Cha	ange 🔲 Addition	
NAME	KING, JAMES M		2.2 NAME					i	
STREET ADDRES			2 3 STREET ADDRESS		1				
CITY-ST-ZIP	OHLANDO FL			ST-ZIP			- 12		
TITLE		L_J DELETE 3.11					☐ Cha	inge L. Addition	
NAME STREET ADDRES	ares		3.2 NAME 3.3 STREET ADDRESS						
CITY-ST-ZIP	·		3.3 STREET					!	
TITLE		DELETE 4.17		51-21r			☐ Cha	inge . Addition	
NAME		_	4. 2 NAME		-			ngo (Li ziautton	
STREET ADDRES	s		4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 City-S						
TITLE		☐ DELETE	51 TITLE				Cha	nge Addition	
NAME	521		5.2 NAME					į	
STREET ADDRES	s		5.3 STREET	address				[
CITY-ST-ZIP		T no per	5.4 CITY - S	T - ZIP					
TALE	☐ DELETE			6.1 TITLE			☐ Cha	nge 🔲 Addition	
NAME			6.2 NAME		İ				
STREET ADDRESS	8		6.3 STREET		1				
14. I hereby	I certify that the information supplied	with this filing does not qualify for t	6.4 CITY-S the exemp	1-ZIP lion state	d in Section 119.0	7(3)(i). Florida Statutes i f	urther certify the	t the information	

indicated on this annual report or supplemental arrival 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.