

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

FILED

May 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Northam</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000043120 (1)**

1. Corporation Name  
**BLACK DRAGON PRODUCTIONS, INC.**



Principal Place of Business <b>225 LITTLE POND LANE SARASOTA FL 34243 US</b>	Mailing Address <b>225 LITTLE POND LN SARASOTA FL 34243 US</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**06/02/1995**

2. Principal Place of Business 21 <b>1111 N. Gulf Stream Ave.</b> Suite, Apt. #, etc. <b>#17E</b> 22 City & State <b>SARASOTA FL</b> Zip <b>34236</b> Country <b>USA</b>	2a. Mailing Address 26 <b>8466 N. Lockwood Ridge Rd</b> Suite, Apt. #, etc. <b>Suite 344</b> 27 City & State <b>SARASOTA FL</b> Zip <b>34243</b> Country <b>USA</b>
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4. FEI Number  
**65-0585662**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BONNER, LOREE G  
225 LITTLE POND LANE  
SARASOTA FL 34242**

81 Name <b>L. GILLIAN BONNER</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>1111 NORTH GULF Stream Ave.</b>
83 <b>#17E</b>
84 City <b>SARASOTA</b>
85 Zip Code <b>FL 34236</b>

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]*

(NOTE: Registered Agent signature required when reinstating)

DATE **1/22/98**

12. OFFICERS AND DIRECTORS	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE
NAME	<b>BONNER, LOREE G</b>
STREET ADDRESS	<b>225 LITTLE POND LANE</b>
CITY - ST - ZIP	<b>SARASOTA FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<b>PRESIDENT</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>L. GILLIAN BONNER</b>
1.3 STREET ADDRESS	<b>1111 N. Gulf Stream Ave. #17E</b>
1.4 CITY - ST - ZIP	<b>SARASOTA, FL 34236</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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.

SIGNATURE:

*[Signature]*

4/21/98

CP2E034 (10/97)