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 # P95000043249

APERTURE PROFESSIONAL STUDIOS, INC.

Principal Place of Business

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90149 033 ***150.00



1330 18TH : MIAMI BEAC	STREET	Mailing Address 1330 18TH STREET				. soussous see const with south oracle south settle acces billio yield giffe 1811 (1911)				
MINMI DEAU	n rL 33139	MIAMI BEACH FL 33139	9							
						DO NOT WRITE IN THIS SPACE				
						Date Incorporated or Qualifed				
2. Principal	Place of Business	2a. Mailing Address				06/06/1995				ł
21		26 Walling Address				4. FEI Number Applied For				
Suite, Ap	ot. #, etc.	Suite, Apt. #, etc.				65-0598188		 	Not Applicat	Ja
22		27				5. Certificate of Status Desired		- \$8.7	5 Additional	-
City & St	ate	City & State							Required	
3		28				6. Election Campaign Financing \$5.00				
Zip ¬	Country Zip			unto		Trust Fund Contribution		Adde	d to Fees	
4	25 29		Country 30			8. This corporation owes the current year Intangible				\dashv
	9. Name and Address of Curren	t Registered Agent	1301	Τ		Personal Property Tax.		Voc	□No	
SH	NEYER, HOWARD L			81	Name	10. Name and Address of New Re	gistered	Agent		7
122	0 18TH STREET				<u></u>	•				\neg
				82	Street Addres	ss (P.O. Box Number is Not Acceptab				
WIIM	MI BEACH FL 33139			83			- <i>'</i> ,			1
										\dashv
				84	City					_
 Pursuant 	to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligati	and 607 1508 Florido Statu	4	Ш			FL	85 Zip	Code	1
agent. I a	registered agent, or both, in the State of the following the state of the colling the coll	f Florida. Such change was a	tes, the a authorized	bove I bv t	 named corporation? 	ation submits this statement for the pu	rpose of (hanging it	s registered	\dashv
IGNATURE	and decept the obligati	ons of, Section 607,0505, Flo	orida Statu	ites.	co.poration	a board of directors. I hereby accept t	ne appoin	tment as r	egistered	j
	Signature, typed or printed name of registered agent	and title if applicable								-
2. ————	OFFICERS AND	DIRECTORS	13.	Agent	signature required wh		DATE.		·	1.
LE]	U	☐ DELETE		1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECT	ORS IN 12	- 3
ME	SHNEYER, HOWARD L				1			Change		7
REET ADDRESS	9317 BAY DR.		1.2 NAME 1.3 STREET AD						_	
Y-ST-ZIP	SURFSIDE FL 33154				i					5
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AE .	SHNEYER, LINDA		2.1 TITLE		ĺ			☐ Change	☐ Addition	1 5
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<u></u>			5.4 CITY-5	ST-ZIP	,			;	ļ	
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hereby cort	if that the i		6.4 CITY-S	T-ZIP						

I hereby certify that the information supplied with this fiting 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 with all other like empowered.

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