FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION OF C	CORPORATIONS		
DOCUMENT # P95000053221 (4) ON AIR PRODUCTIONS, INC.					
				# 1 7.6 1.11.11.11.11.11.11.11.11.11.11.11.11.1	
Principal Place of Business Mailing Address				I YOUNTEN HE YORDN BINN 980N DEN	
3500 NORTH STATE ROAD 7. SUITE 333A 3500 NORTH STATE ROA			AD 7. SUITE 333A		
LAUDERDALE LAKES FL 33319 LAUDERDALE LAKES FL 3			33319		
			_	3. Date Incorporated or Qualified 07/11/1995	3a. Date of Last Report
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
26 Suite, Apt. #, etc. Suite, Apt. #, etc.			65-060145		
22 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5 00 May Ba
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Zip 29	Country	8. This corporation has liability for	
	9. Name and Address of Curren		30	Florida Statutes Yes 10. Name and Address of New R	No
81 Name				0 - 1	egistored Agent
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD				ress (P.O. Box Number is Not Acceptab	10)
343 ALMERIA AVENUE			5119	NW 59th	" L25
CORAL GABLES FL 33134			83		3
			84 City	iai springs	■■ 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-ror registered agent or both in the State of Florida, Such change was authorized by the control of the cont					FI 22222
or registere	ed agent, or both, in the State of Floric	da. Such change was authorized	by the corporation's boar	ration submits this statement for the pur rd of directors. I hereby accept the appo	pose of changing its registered office ointment as registered agent. I am
	ri, and accept the obligations of, Secti	on 607.0505, Florida Statutes.	1) —		1 1
SIGNATURE	signature, typed or printed note of registered agent.	and title if applicable (NOTE	He jistered Agent signature required	d when re-installing)	04/20/96,
12.	OFFICERS AND	···	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	PD OVERTE LODGE	☐ DELETE	1. 1 TITLE		☐ Change ☐ Addition
NAME Street Labores	SYNTTE, JORDAN	CUITE AAAA	1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	3500 NORTH STATE ROAD 7 LAUDERDALE LAKES FL 333		1.3 STREET ADDRESS		
TILE	STD	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE		
NAME	SYNTTE, LINDA		22 NAME		☐ Change ☐ Addition
STREET ADDRESS	3500 NORTH STATE ROAD 7	. SUITE 333A	2 3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERDALE LAKES FL 333		24 CITY-ST-ZIP		
TITLE		☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		· -
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-ST-ZIP TITLE		Dhier	3 4 CITY-ST-ZIP		
NAME		☐ DELETE	4.1 TITLE		Change Addition
STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		l
TITLE	-	☐ DELETE	5. 1 TITLE		Change Addition
NAME		-	5.2 NAME		Clickette Clickette
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE	•	Change Addition
NAME CENTER ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		ļ
14. I do hereby	certify that the information supplied w	ith this filing is unjustable furnish.	6.4 CITY - ST - ZIP		

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Fiorida 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR