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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jun 04 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

P95000057976 (9)

STAGESTALKER ENTERTAINMENT, INC.

Principal Place	of Rusiness	Mailing Address		
821 3RD ST		821 3RD ST		
W PALM BOH FL 33401		W PALM BCH FL 33401		
US		US		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified 07/25/1995
2. Principal Pl	ace of Business	2a. Mailing Address	··	4. FEI Number Applied For
├─ त ं ├─त ॉ		26		65-0599514 Not Applicable
Suite, Apt. #, etc. Suitc, Apt. #, etc.			CO 75 A 400	
27		27		5. Certificate of Status Desired Fee Required
City & State City & S		City & Stale		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution
Zip	Country	Ζip	Country	8. This corporation owes or has paid the current year intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	int Registered Agent		10. Name and Address of New Registered Agent
	WSOME, HERBERT JR.		81 Nar	lame
	3RD STREET		82 Stre	treet Address (P.O. Box Number is Not Acceptable)
WE	ST PALM BEACH FL 33401			
. 4			83	
			84 City	FL 85 Zip Code
11. Pursuant to	o the provisions of Sections 607.05	02 and 607 1508. Florida Statu	tes the above-parr	armed corporation submits this statement for the purpose of changing its registered
*office or re	ogistered agent, or both, in the Staten familiar with, and accept the oblig	le of Horida. Such change was	authorized by the d	e corporation's board of directors. I hereby accept the appointment as registered
•	н шаншаг мин, ано ассерт те оощ	улиона от, аесион вол олов, гт	ionda statutes.	
SIGNATURE.	Stgn at ure ityle of or printed name of registered as	grot and title Capposable (NO	II : Hegistered Agent sign:	gnature required when reinstatiog) DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLE		☐ DELFTE	1.1 TITLE	Change Addition
NAME	WHITAKER, ERIC W		1.2 NAME	
STREET ADDRESS	1880 N CONGRESS, APT 64	105	1.3 STREET ADDRE	RESS
CITY-ST-ZIP	W PALM BCH FL		1.4 CITY - ST - ZIP	P
TITLE	VP	DELETE	2.1 TITLE	Change Addition
NAME	MORALES, RAMIRO R		2.2 NAME	
STREET ADDRESS	11491 TURNSTONE DR		2.3 STREET ADDRE	RESS
CITY-ST-ZIP	WELLINGTON FL		2.4 CITY-ST-ZIP	PP
TITLE		☐ DELF1E	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3 3 STREET ADDRE	RESS
CITY-ST-ZIP			3.4. CITY-ST-ZIP	Р
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	RESS
CITY-ST-ZIP		<u>.</u>	4.4 CITY-ST-ZIP	
TITLE		☐ D£LET E	5.1 THLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	RESS
CITY-ST-ZIP			5.4 CITY - \$T - ZIP	>
TITLE		☐ DELETE	6.1 THILE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRES	RESS

6.4 CIIY-S1-ZIP

14. Thereby 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 of 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 attraction of the receiver of the corporation of