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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000071702 (1)

VALIKUS RECORDS, PRODUCTIONS & PUBLISHING CO., I

ſ	rincipa	Place	of	Business	3

Mailing Address

FILED

May 09 1997 8:00am

Secretary of State

BUTE # HOLLYWOOD FL 33083-4071 HOLLYWOOD FL 33083												
US .							1	Date Incorporated or Qualified 09/18/1995		of Last Report /1996		
2. Principal Place of Business 2a.			Mailing Address			4.	FEI Number 65-0623563		Applied For Not Applicable			
Suffe, Apt. #, etc.			Suite, Apt. #, etc.			Б.	Certificate of Status Desired	\$0.75 Audit				
City & State		28	City & State				1	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 14	Country 25	29	Zip	30	untry			This corporation has liability for i Florida Statutes	ntangible ta Yes 🔲			
9, Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
WOODS, ISAAC 2410 S.W. 52ND AVENUE					81 82	Name Street Addre	ress (P.O. Box Number is Not Acceptable) .					
HOLLYWOOD FL 33023					83							
= # 0												
· ·					84	City		i.	FL	85 Zip Code		
Office or register	provisions of Sections 607. red agent, or both, in the S liar with, and accept the o	late of Flori	ida. Such chario	e was authorize	d by	the corporatio	ration on's bo	submits this statement for the poard of directors. I hereby accep	urpose of cl of the appoir	nanging its registered introduction		

11. Pursuant office or reagent. I a	to the provisions of Sections 607.0502 and 607.15 agistered agent, or both, in the State of Florida. So in familiar with, and accept the obligations of, Sec	08, Florida Statutes, ich change was aut tion 607.0505, Floric	the above-named of horized by the corp la Statules.	corporation submits this state oration's board of directors. I	ment for the purpose of hereby accept the app	of changing its pointment as	s registered registered
SIGNATURE	Signature, typed or printed name of registered agent and little if applic	able (NO)t R	coistered Agent signature i	required when reinstation)	-IAQ	·	
12.	OFFICERS AND DIRECTOR		13.		SES TO OFFICERS AN	D DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE	•		Change	Addition
NAME	WOODS, ISAAC		1.2 NAME	9			
STREET ADDRESS	2410 S.W. 52ND AVENUE		1.3 STREET ADDRESS				
CITY-ST-ZIP	HÖLLYWOOD FL 33023		1.4 CITY - ST - ZIP				
TITLE	D'	DELETE	2.1 TITLE		······································	Change	Addition
NAME	WOODS, VALERIE		2.2 NAME				
STREET ADDRESS	2410 S.W. 52ND AVENUE		2.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL 33023	•	2. 4 CITY - ST - ZIP				
TITLE		DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP	·		3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE		•	Change	Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY - ST - ZIP				
FITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY - ST - ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME :			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				

64 CITY-ST-ZIP

14. I do 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 trusted employered to execute this report as required by Chapter 607, Florida Statutes; and that my name