SECOND NOTICE: Corporation will be dissolved on or after august 7, 1006.

Amount due on or before 8/7/96: \$225 (If Dissolved, Minimum Amount due to Reinstate: \$345.)

PROFIT * CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # p95000072211

GLORIA KISEL'S TALENT WORLD PRODUCTIONS,

Mailing Address Principal Place of Business

FILED 96 OCT 21 PM 1: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA

| | each, Florida 3348 | | | Date Incorporated or Qualified 9/19/95 | 3a. Date of Last 1996 , Ma | y |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|------------------------------------------|----------------------------------|
| Principal Pl | ace of Business eruvian Ave. | 2a. Mailing Address | | 4. FEI Number | | Applied For |
| <u> </u> | | 26 same | | 65-0655936 | | Not Applicable |
| Suite, Apt. | 4 | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | 1 1 | Additional Required |
| 1 | Beach, FL 33480 | City & State | | Election Campaign Financing Trust Fund Contribution | Added Added | May Be to Fees |
| ^{Z_{ID}} 33480 | | | Country | | Yes 🔼 No | s. 199.032, |
| | 9. Name and Address of Current R | legistered Agent | 40.00 | 10. Name and Address of New Reg | gistered Agent | |
| | | | 81 Namé S | AME | | |
| loria K | | | 82 Street Add | dress (P.O. Box Number is Not Acceptable | le) | - |
| | vian Ave., Suite 4 | | 83 | · · · · · · · · · · · · · · · · · · · | | |
| alm Bea | ch, FL 33480 | | 63 | | | |
| | | | 84 City | | FL 85 Zip | Code |
| 1 Pursuant t | to the provisions of Sections 607 0502 a | ind 607 1508. Florida Statutes | the above-named cor | poration submits this statement for the pr | urpose of changing | its registerer |
| office or re | egistered agent, or both, in the State of in familiar with, and accept the obligation | Florida, Such change was au | thorized by the corpora | ation's board of directors. I hereby accep | t the appointment a | s registered |
| - | m familia, with, and accept the obligation | iris di, seciidii 607.0303, Fidii | Gloria Ki | isel 9/30/96 | | |
| ignature . | Signature, typed or printed hance of registered agent a | nditire diapplicante (NOTE | Bogish red Agent signature requ | | DATE | |
| 2. | OFFICERS AND D | DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFIC | | |
| TLF | -1 · ++ · 1 PDDGT | DENTI DELETE | | | Channe | 6.43 0.4 |
| I L. I | GLOYIA KISEL- PKESI | DENT LIBERTY | 1 1 1 I I L E | | [] Change | L Additio |
| | Gloria Kisel- PRESI | DIMIT - | 1.1 TITLE 1.2 NAME | | [_] Change | Additio |
| AME | 217 Peruvian Ave., | Suite 4 | | | [_] Cuarige | Addicio |
| AME TREET ADDRESS | | DIMIT - | 1.2 NAME | | | _ |
| AME TREET ADDRESS ITY-ST-ZIP | 217 Peruvian Ave., | Suite 4 | 1.2 NAME 1.3 STREET ADORESS | 000001 | | _ |
| AME TREET ADDRESS ITY-ST-ZIP TLE | 217 Peruvian Ave., James Ingrassia | Suite 4 AND DIRECTOR | 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP | 000001: | | _ |
| AME TREET ADDRESS ITY-ST-ZIP TLE AME | James Ingrassia 938 Mandarine St. | Suite 4 AND DIRECTOR | 1.2 NAME 1.3 STREET ADDRESS 1.4 GITY - ST - ZIP 2.1 TITLE | 000001: -10/25, ****** | 98656 79601103 | O Addit@ |
| IAME TREET ADDRESS ITY-ST-ZIP ITTE IAME TREET ADDRESS ITY-ST-ZIP | 217 Peruvian Ave., James Ingrassia | Suite 4 AND DIRECTOR | 1.2 NAME 1.3 STREET ADORESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME | 000001: -10/25. ****** | 98656 /9601103 61.25 *** | O □ Addit@ 007 **61.29 |
| AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP | James Ingrassia 938 Mandarine St. | Suite 4 AND DIRECTOR | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS | 000001: -10/25. ****** | 98656 79601103 | O □ Addit® 007 **61.25 |
| AME TREE LADDRESS HTY-SI-ZIP TLE AME TREET ADDRESS HTY-SI-ZIP ILE | James Ingrassia 938 Mandarine St. | Suite 4 AND DIRECTOR KONTELE 34 DIRECTOR | 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | 000001: -10/25. ****** | 98656 /9601103 61.25 *** | O □ Addity 007 **61.25 |
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Gloria Kisel

INTED TAVE OF SIGNING OFFICER OR DIRECTOR

9/30/96 (561)835-1766