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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P95000072366 (4) DOCUMENT #

1. Corporation Name

OUTRAGEOUS PRODUCTIONS. INC. Principal Place of Business Mailing Address 1237 HILLSBORO MILE 1237 HILLSBORO MILE HILLSBORO BOH FL 33062 DO NOT WRITE IN THIS SPACE HILLSBORO BCH FL 33062 3. Date Incorporated or Qualified 09/19/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 5710 NW Street Street 5710 NW 65-0612479 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be florida Parkland Flanda Parklan d 23 28 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 33067 US A USA 29 Yes ☐ No Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHWARTZ, ROBERT D 9098 PINES SPRINGS DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33428** 83 84 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE __ DELETE 1.1 TrTLE Change ___ Addition TICE, MICHAEL JOHN NAME 1.2 NAME 1237 HILLSBORO MILE #502 STREET ADDRESS 1.3 STREET ADDRESS HILLSBORO BCH FL 23067 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITL F 2.1 TITLE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 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 DELETE TITLE 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 CITY-ST-ZIP 6.4 CiTY - ST - ZIP

14. I 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 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.

FILED

Feb 20 1998 8:00am

Secretary of State