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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000083600 (3)

WIZARD STUDIOS INTERNATIONAL, INC.

		······································		
Principa! Place of Business	Mailing Address		1 100/1001 110 39/9F 8/9/1 80/11 Warre \$\$\$11	g Mit gille seite Meitt Smitt mutt ener
14483 62ND STREET NORTH UNIT B	14483 62ND STREET NOR UNIT B	тн		
CLEARWATER FL 34620	CLEARWATER FL 34620-27	744		
· ·			3. Date Incorporated or Qualified 11/01/1995	3a, Date of Last Report 06/06/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3354195	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Zip	Country	Trust Fund Contribution 8. This corporation has liability for	
24 26	29	30		Yes No
9. Name and Address of Curro			10. Name and Address of New Re	
GIBBY, DANIEL J		81 Name	155ell Brunheld	
101 EAST KENNEDY BLVD.		82 Street Addr	ress (P.O. Box Number is Not Acceptate	ole)
SUITE 3700 BARNETT PLAZA		1948	13 6210 STRU.	
TAMPA FL 33602		83 Uni	+ B	
		0.4 ∧3		- 85 Zip Code
	1	I Diea	irwater	FL 34620
11, Pursuant to the provisions of Sections 60* 0; office or registered agent, or both, in the eta agent. I am familiar with, and accept the obj	502 and 1807, 1508, Florida Statut ite of Florida, Such change was i	ies, the above-named corp authorized by the corporat	poration submits this statement for the parties to be acceptable to a contract of directors. I hereby acceptable to the contract of the contra	ourpose of changing its registered of the appointment as registered
agent. I am familiar With, and accept the obj	Mations of Section 607.0505, Flo	orida Statutes.		1 10 00
SIGNATURE		CRUSSEII	Brumpeld	4-18-4+
Signature, typed guilfrited name if registered a OFFICERS A		FE: Registered Agent signature requirements	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND DIRECTORS IN 12
TITLE CHAR	DELETE	1.1 TOLE	ADDITIONO/OF WITGED TO C	Change Addition
NAME BRUMFIELD, RUSSELL C.		1.2 NAME		
STREET ADDRESS 14483 62ND STREET NORTH	H #B	1.3 STREET ADDRESS		
CHY-ST-ZiP CLEARWATER FL 34820		1.4 CITY-ST-ZIP		
DILE	DELETE	2.1 ¥ITLE		Change Addition
		2.2 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
CHY-ST-ZP	Dorutte	2. 4 CITY-ST-ZIP		D. C
THLE	DELETE	8.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3 3 STREET ADDRESS		
CHY-SI-2IP	DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		4.2 NAME		Access of the control
STREET ADDRESS		4.3 STREET ADDRESS		
Cily - SI - ZiP		4.4 CITY-ST-ZIP		
		5.1 TITLE		Change Addition
TOLE	DELETE	5.1 7.1.EE		
TIPLE NAME	[_] DELETE	5.2 NAME		
İ	C DETEIF			
NAME	-	5.2 NAME		
NAME STREET ADDRESS	DELETE	5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Addition
NAME STREET ADORESS CITY-ST-ZIP	-	5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
NAME STATE F ADDRESS CITY: ST-ZIP TITLE	-	5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition