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PROFIT CORPORATION **ANNUAL REPORT**

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 28 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

P95000085549 (0) DOCUMENT #

JIM DERUSHA PRODUCTIONS, INC.

Principal Place of Business Mailing Address DISNEYMOM STUDIOS LAKE BUENA VIŜTA 1 FL 32830 DISNEY MGM STUDIOS PO BOX 10200 PROD D-6 DO NOT WRITE IN THIS SPACE LAKE BUENA VISTA FL 32830 3. Date Incorporated or Qualified 11/03/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-3344435 Not Applicable Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered/Agent 81 MCLEOD, W. EDWARD ESQ. Street Address (P.O. Box Number is Not Acceptable) Sah ϵ C/O W. EDWARD MCLEOD, P.A. 82 201 SOUTH ORANGE AVE., SUITE 1010 1551 SANDSPUR 83 ORLANDO FL 32801 84 City Zip Code 3275/ MAITLAND 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 reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, OFFICERS AND DIRECTORS 13. DELETE ___ Addition TITLE 1.1 TITLE Change DERUSHA, JIM NAME 1.2 NAME 10020 BRANDON CIRCLE STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32836 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Addition TITLE Channe 21 TITLE 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$T - ZIP DELETE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE -Change Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 14. I hereby certify that the information supplied with this filling 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 suppliemental 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 trystee 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 attactional with an address.

SIGNATURE:

401-560-8030

4/17/98

401.560-8030