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Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000089969 (6)

1. Corporation Name
BULLPEN PRODUCTIONS, INC.



Principal Place of Business
2715 N OCEAN BLVD #5-C
FT LAUDERDALE FL 33308

Mailing Address
2715 N OCEAN BLVD #5-C
FT LAUDERDALE FL 33308-7534

3. Date Incorporated or Qualified 11/15/1995	3a. Date of Last Report 05/01/1996
4. FEI Number APPLIED FOR 65-0629259	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 3031 N. OCEAN BLVD, #9 Suite, Apt. #, etc. 22 #902 City & State 23 FT. LAUDERDALE FL Zip Country 24 33308-7329 25	2a. Mailing Address 26 3031 N. OCEAN BLVD Suite, Apt. #, etc. 27 #402 City & State 28 FT. LAUDERDALE FL Zip Country 29 33308-7329 30
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9. Name and Address of Current Registered Agent LOTERSTEIN, MARK J 2715 N OCEAN BLVD #5-C FT LAUDERDALE FL 33308	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 3031 N. OCEAN BLVD, #902 83 84 City FT. LAUDERDALE FL 85 Zip Code 33308
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOTERSTEIN, MARK J 2715 N OCEAN BLVD #5-C FT LAUDERDALE FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DIRECTOR <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3031 N. OCEAN BLVD, #902 FT. LAUDERDALE, FL 33308-7329
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOTERSTEIN, ARTHUR 2715 N OCEAN BLVD #5-C FT LAUDERDALE FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3031 N. OCEAN BLVD, #902 FT. LAUDERDALE, FL 33308-7329
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS SCHIEBER, RAYMOND A 3208 LAKE SHORE DR ESCANABA MI <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 49829
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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.

SIGNATURE _____

CR2E034 (9/96)