

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000098087 (6)

1. Corporation Name

RPM PRODUCTIONS, INC.



Principal Place of Business

2291 WINSLOW CIRCLE
CASSELBERRY FL 32707

Mailing Address

2291 WINSLOW CIRCLE
CASSELBERRY FL 32707

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
417 E. VIRGINIA ST, SUITE 1
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified
12/29/1995

3a. Date of Last Report

N/A

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

JORDAN F. CAMENKER

82 Street Address (P.O. Box Number is Not Acceptable)

202 Lookout Place, Suite 110

83

84 City

Maitland

FL

85 Zip Code
32751

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

JORDAN F. CAMENKER

JORDAN F. CAMENKER

2/9/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME GLANER, KIM
STREET ADDRESS 2291 WINSLOW CIRCLE
CITY-ST-ZIP CASSELBERRY FL 32707

TITLE
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CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D
1.2 NAME STERLING L GLANER
1.3 STREET ADDRESS 24 FULTON PLACE
1.4 CITY-ST-ZIP PALM COAST FL 32137

2.1 TITLE T/S/D
2.2 NAME KIM GLANER
2.3 STREET ADDRESS 2291 WINSLOW CIR
2.4 CITY-ST-ZIP CASSELBERRY FL 32707

3.1 TITLE V/D
3.2 NAME KEVIN O'CONNOR
3.3 STREET ADDRESS 629 E. LIVINGSTON ST
3.4 CITY-ST-ZIP ORLANDO FL 32803

4.1 TITLE V/D
4.2 NAME L. THOMAS WOOTTON
4.3 STREET ADDRESS 2610 N.W. 69TH TERR
4.4 CITY-ST-ZIP GAINESVILLE FL 32606

5.1 TITLE V/D
5.2 NAME DOUGLAS PAUL
5.3 STREET ADDRESS 6 PEPPER RD
5.4 CITY-ST-ZIP TOWACO NJ 07082

6.1 TITLE D
6.2 NAME LINELL WOOTTON-MIKELL
6.3 STREET ADDRESS 1820 VIA CONTESSA
6.4 CITY-ST-ZIP WINTER PARK FL 32789

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 as an attachment with an address.

SIGNATURE:

Kim Glaner KIM GLANER

2/9/96

407-260-8241

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE

CR2E034 (12/95)