

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000011741

1. Corporation Name

4 GIRLS ONLY PRODUCTIONS, INC.

Principal Place of Business

5941 WINDHOVER DR.
ORLANDO FL 32819

Mailing Address

5941 WINDHOVER DR.
ORLANDO FL 32819

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90206 002 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/02/1996

4. FEI Number

59-3366144

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

RODRIGUEZ, SANDRA
1857 CROWLEY CIR. E.
LONGWOOD FL 32779

10. Name and Address of New Registered Agent

81 Name

Melody D. Miller

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

5941 Windhover Dr.

83

84

Orlando

FL

85 Zip Code

32819

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 of registered agent or authorized agent (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

Melody D. Miller (President)

1/23/99

12. OFFICERS AND DIRECTORS

TITLE DS
NAME MILLER, MELODY
STREET ADDRESS 5941 WINDHOVER DR.
CITY-ST-ZIP ORLANDO FL

☐ DELETE

TITLE DV
NAME BANKSON, PATTI
STREET ADDRESS 2 ORANGEWOOD CT
CITY-ST-ZIP APOPKA FL

☐ DELETE

TITLE DP
NAME MOCK, STACY
STREET ADDRESS 8013 CLOVERGLEN CR
CITY-ST-ZIP ORLANDO FL

☒ DELETE

TITLE DT
NAME RODRIGUEZ, SANDRA
STREET ADDRESS 1857 CROWLEY CR E
CITY-ST-ZIP LONGWOOD FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME Miller, Melody
1.3 STREET ADDRESS 5941 Windhover Dr.
1.4 CITY-ST-ZIP Orlando, FL 32819

☒ Change ☐ Addition

2.1 TITLE V. President
2.2 NAME Miller, Cory
2.3 STREET ADDRESS 5941 Windhover Dr.
2.4 CITY-ST-ZIP Orlando, FL 32819

☐ Change ☒ Addition

3.1 TITLE Secretary
3.2 NAME Bankson, Patti
3.3 STREET ADDRESS 2 Orangewood Ct.
3.4 CITY-ST-ZIP Apopka, FL 32703

☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

Melody D. Miller
President

1/23/99

Date

(407) 351-3318

Daytime Phone #

CR2E034 (11/98)