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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

	·				
DOC 1. Corpor	UMENT	#	P96,000	<i>i</i> 2	7 005

CARLEIGH FILMS, INC.

Principal Place of Business

Mailing Address

2095 N. ANDRENS AVE				
POMPANO BEACH FL 3	3069	3. Date Incorporated or Qualified 3/27/96	3a. Date of Last Report	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 10 FAIRWAY DRIVE	26 10 FAIRWAY	DRIVE	65-0742981	Not Applicable
Suite, Apr #, etc 22 SUITE # 213	Suite, Apt. #, etc.	13	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 DEERFIELD BEACH FL	City & State	_	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
7ip Country 24 33441 25 VSA	Zip	Country USA	8. This corporation has liability for i	· · · · · · · · · · · · · · · · · · ·
9. Name and Address of Curr		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	10. Name and Address of New Re	
		81 Name		
		KIC	CHARD SHAHEEN	
		62 Street Ao	dress (P.O. Box Number is Not Acceptable NW 100 TERRACE	
		84 City		FL 85 Zip Code 3 30 7 6
11. Pursuant to the provisions of Sections 607.0	502 and 607 1508. Florida Statutes			
office or registered agent, or both, in the Sta	ate of Florida. Such change was au	thorized by the corpor	ation's board of directors. I hereby accep	the appointment as registered
agent Tamilanillar with, and accept the ob-	- L			16/20/2-
SIGNATURE Mohand Shaha	agent and life of applicable (NOTE I	H77 HE EV Registered Agent signature req	and the constalinat	7/28/97
	AND DIRECTORS	Hogistered Agent signature red	ADDITIONS/CHANGES TO OFFIC	· · · · · · · · · · · · · · · · · · ·
	DELETE	1.1 TITLE /	70/10/10/10	Change Addition
NAME D/VP/S		_	311111111111111111111111111111111111111	man - contra transfer
STRET APPRIES RICHARD SHAHEEN	V	1.3 STREET ADDRESS	RICHARD SHAHEEN	
4122 NW DO TERR	PACE 27071	1.0 SHILL I ADURESS	1672 NW 100 TERRACE CORAL SPRINGS FL	32076
THE NOTE	FZ 33076	1.4 CITY-ST-ZIP		Change Addition
D/P I		1_4	POLINE REPLA	
TRVING BLAND	A 94	2.2 NAME 2.3 STREET ADDRESS	RVING BRAND OAK	ST
STREET ALTIMUS 5467 LAWEL OAK ONY STATE DELRAY BEACH F.	1 22494			33484
	C 33987	2.4 CITY-ST-ZIP	may war ic	Change Addition
Tifet	Land Deterie	3.2 NAME	,	La change La radition
NAME				
STREET ADDRESS:		3.3 STREET ADDRESS		
COLVERT 200	DELETE	3.4 CITY-ST-ZIP		Change Addition
THE	C) Deterit			C change C Mandan
NAME.	•	4. 2 NAMÉ		1
STREET ADDRESS.		4.3 STREET ADDRESS		/, ,
City St Air	T DELETE	4.4 CITY - \$T - ZIP		Channal I Add sinn
THE	L DELETE	5.1 TITLE		Change L Addition
NAME		5.2 NAME	•••	405/1/1/7
SHETALOR SS		5.3 STREET ADDRESS		1114417
(0, A. 21-V)	T nei ere	5.4 CiTY-ST-ZiP		Change Addition
11/LF	☐ DELĘTE	61 TITLE	20000212	☐ Change ☐ Addition
NAM*		6 2 NAME	30000217 -05/13/970103 ***173.75	U 1 016
State CA (Bales)		6 3 STREET ADDRESS	997 197 91 " "0107 444179 75	11 010
CLV St. Zer		6.4 CiTY+ST-ZIP	⊕⊕⊕1 ∂. ∂	

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 in disated 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 annual or 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 Brook 12 or Block 13 if changed, or on an attachment with an address

SHAHEEN

FILED

May 06 1997 8:00am

Secretary of State