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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000029860 (9)

N T R PRODUCTIONS, INC.

Principal Place of Business 16830 N.W. 57TH AVENUE NO.107 MIAMI FL 33015		Maining Address 18830 N.W. 57TH AVENUE NO.107 MIAMI FL 33015-7014			
				3. Date Incorporated or Qualified 04/04/1996	3a. Date of Last Report
_	ace of Business	2a. Mailing Address		4. FET Number	Applied For
Sulte, Apt.	# oto	26		650643844	Not Applicable
22	r, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State)	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		1 rust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25 9. Name and Address of Current F		30	Florida Statutes 10. Name and Address of New Reg	Yes No
1883 NO.1 MIAI	WI FL 33015 to the provisions of Sections 607.0502 a spistered agent, or both, in the State of	Florida. Such change was au	84 City S, the above named co	CUSSELL NORMAN briess (P.G. Box Number is Not Acceptable O. W. 5.7 H. A. Imporation submits this statement for the pation's board of directors. I hereby acceptable	FL 85 7tp Code 33015
SIGNATURE	in familiar with, and accept the obligation familiar with, and accept the obligation of familiar with a second accept the obli		ida Statutes Itogislored Agon: Eignature req	uited which remoted way	DAIE
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	D	☐ DELETE	1.1 TIPLE		Change Addition
NAME	RUSSELL, NORMAN T 18830 N.W. 57TH AVE. NO. 107		1.2 NAME		
STREET ADDRESS	MIAMI FL 33015		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DITTEL	1.4 CITY+ ST+ 7IP 2.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		<u> </u>	2.2 NAME		□ o revide □ vocition
STREET ADORESS			2.3 STHELL ADDRESS		
CITY-ST-ZIP			2 4 CITY - S1 - ZIP		
TITLE		DETETE	3.1 THEE		Change Addition
name ,			3.2 NAME		
STREET ADDRESS			3.3 STHELL ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4 City-St-ZiP		Пент Пхи
NAME		E.J WEGGE	4.1 TOLE 4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET AUDRESS		
CITY-ST-ZIP			44 CITY - ST - 71P		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY+S1+ZiP		
TITLE		DELETE	61 THEF		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			6.4 CiTY - S1 - 7IP		
information I am an of	n indicated on this annual report or such	plemental annual report is tru e receiver or trustee empowe	c and accurate and that red to execute this rest	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same lega off as required by Chapter 607, Florida S	Laffact se if mada under cally that