PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600038796

1. Corporation Name

ASPEN PRODUCTIONS, INC.

Principal Place of Business

Mailing Address

6610 N.W. 89TH AVE.

6610 N.W. 89TH AVE.

May 06, 1999 8:00 am Secretary of State

05-06-1999 90178 023 ***158.75



TAMARAC FL 33321		TAMARAC FL 33321		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualifed 05/03/1996	
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /3 <i>63</i> 8	154 PLACE NO	26 13638 154	PLACE N.	65-0663546	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
	-	City & State	<u></u>	6. Election Campaign Financing	\$5.00 May Be
23 JUP1	TER, FL Country	Zip Zip		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year I	ntangible
za ろく4		29 3 3 4 78 30	USA	Personal Property Tax.	Yes □No
	9. Name and Address of Current	t Registered Agent	81 Name	10. Name and Address of New Registere	d Agent
BRESNIHAN, WILLIAM T JR				I I AM T ROFENIHAN S	TR
				81 Name WILLIAM T. BRESNIHAN JR. 82 Street Address (P.O. Box Number is Not Acceptable)	
6610 N.W. 89TH AVE.			136	38 154 PLACE N.	<u>'</u>
TAMARAC FL 33321				<u> </u>	
			84 City 7	UPITER F	85 Zip Code 3 3 4 7 8
44 Durawant	to the provinces of Sections 607 0500	2 and 607 1508 Florida Statutes	the above-named co	progration submits this statement for the purpose	of changing its registered
office or re	egistered agent, or both, in the State o	of Florida, Such change was auth	ionizea by the corpora	ation's board of directors. I hereby accept the app	ointment as registered
agent. I ar	n familiar with, and accept the obligation	ions of, Section 607 0505, Florida	a Statutes.	4 27-90	7
SIGNATURE	Millmill	remps	4-/	4-27-99	<u>/</u>
	Signature, typed or printed name of registered egent OFFICERS ANI	<u> </u>	egistered Agent signature requ	Ulred when remistating)	**** S'DECTORO IV. 40
12.	D OFFICERS AND	DELETÉ	13.	ADDITIONS/CHANGES TO OFFICERS ADDITIONS/CHANGES ADDITI	Change Addition
TITLE	· ·	> DECEME	121111	DEINIHAN WILLIAM T. JA	?. ~
NAME	BRESNIHAN, WILLIAM T JR.	,	1.2 NAME 2	DEZUICH PLACE NO	
STREET ADDRESS	6610 N.W. 89TH AVE.		1.3 STREET ADDRESS 7	TUPITER, FL 33478	
CITY-ST-ZIP	TAMARAC FL 33321	- Delete		SUPITER, PD 334/8	Change Addition
TITLE		☐ DELETE	2.1 TITLE		□ outlinge □ Motion
NAMÉ			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		Ţ
CITY-ST-ZIP			2. 4 CITY- ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
			5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
· .			6.2 NAME		
NAME			6.3 STREET ADDRESS		
STREET ADDRESS			6.4 CITY-ST-ZIP		
OUTS/ OT 710			= 0.4 GHT-01*4/F		

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 suppliemental 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR