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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000042020 (3)

COMMAND THEATRICAL PERFORMANCES, INC.

Principal Place of Business Mailing Address 1600 SOUTH DIXIE HIGHWAY #5AB 1600 SOUTH DIXIE HIGHWAY #5AB ROYAL PALM TOWERS III ROYAL PALM TOWERS III **BOCA RATON FL 33432** BOCA RATON FL 33432 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/10/1996 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For 26 21 65-0681058 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Zιρ Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. ☐ Yes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RANDALL, CHARLES P 1600 SOUTH DIXIE HIGHWAY #5AB 82 Street Address (P.O. Box Number is Not Acceptable) ROYAL PALM TOWERS III 83 **BOCA RATON FL 33432** 84 Zip Code 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, typod or prioted name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE TITLE Change Addition 1.5 TITLE VØSS, KAY VASS, KAY 1963 SHARON STREET NAME 1.2 NAME **1963 SHARON STREET** STREET ADDRESS 1.3 STREET ADDRESS BOCA RATON FL 33486 **BOCA RATON FL 33486** CITY - ST-ZIP 1.4 CITY-ST-ZIP DELETE Change X Addition TITLE 2.1 TITLE VASS, JAMISE 1963 SHARON STREET NAME STREET ADDRESS 2.3 STHEET ADDRESS BOCA RATON FL 33486 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREFT ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

561-750-5050

FILED

May 15 1998 8:00am

Secretary of State