

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

APPROVED  
AND  
FILED

1997 APR 23 PM 1:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000042401 (5)

1. Corporation Name  
RADIANT HEART PRODUCTIONS, INC.



Principal Place of Business  
1127 BRAFFORTON DRIVE  
TALLAHASSEE FL 32311

Mailing Address  
1127 BRAFFORTON DRIVE  
TALLAHASSEE FL 32311-0710

3. Date Incorporated or Qualified 05/17/1996	3a. Date of Last Report N/A
4. FEI Number 59-3413048	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 9250 W. Atlantic Blvd. Suite, Apt. #, etc. 22 915 City & State 23 Coral Springs, FL Zip 24 33071	2a. Mailing Address 26 9250 W. Atlantic Blvd. Suite, Apt. #, etc. 27 915 City & State 28 Coral Springs, FL Zip 29 33071	Country 25 USA 30 USA
---	--	-----------------------------

9. Name and Address of Current Registered Agent

KNABB, RICHARD DAVID  
1127 BRAFFORTON DRIVE  
TALLAHASSEE FL 32311

10. Name and Address of New Registered Agent

81 Name Richard David Knabb	82 Street Address (P.O. Box Number is Not Acceptable) 9250 W. Atlantic Blvd. #915	83	84 City Coral Springs	85 Zip Code FL 33071
--------------------------------	---	----	--------------------------	-------------------------

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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME Richard D. Knabb	
1.3 STREET ADDRESS 9250 W. Atlantic Blvd. #915	
1.4 CITY - ST - ZIP Coral Springs, FL 33071	
2.1 TITLE V/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME Rhonda Knabb	
2.3 STREET ADDRESS 9250 W. Atlantic Blvd. #915	
2.4 CITY - ST - ZIP Coral Springs, FL 33071	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 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.

SIGNATURE: Richard D. Knabb  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
4/23/97 (954) 752-7060  
Date Daytime Phone #

CR2E034 (9/96)