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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 05 1997 8:00am

Secretary of State

Sandra B. Mortilam

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000043425 (3)

KRUPNICK STUDIO, INC.

SIGNATURE:

1997

Principal Place	e of Business	Mailing Address		I IBBNIBON IEB IBIKA DININ DUNIN DERKE BANK DAN	II <b>eller</b> jahr didir jaer om mel
101 SO VICTORIA PARK ROAD 101 SO VICTOR		101 SO VICTORIA PARK FORT LAUDERDALE FL			
		ı		05/14/1996	a. Date of Last Report
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0672120	Not Applicable
Suite, Apt	4	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for inter-	
24	25	29]	30	Florida Statutes Ye	s 🗆 No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regist	ered Agent
	JPNICK, KIM		81 Name		
	SO VICTORIA PARK ROAD		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
FOF	RT LAUDERDALE FL 33301		83		
•			<b>84</b> City		FL 85 Zip Code
olfice or r	to the provisions of Sections 607,050 registered agent, or both, in the State im famil ar with, and accept the oblig	e of Florida. Such change was	authorized by the corporal	poration submits this statement for the purportion's board of directors. I hereby accept the	ose of changing its registered e appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	over a of the fignolicable (NE	DTE Registered Agent signature regul	ited whop sainstation)	DATE
12.	·	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PRECIDENT	DELETE	1.1 TITLE	The second secon	Change Addition
NAME	MICHAGEL J. KRUPN	KK.	1.2 NAME		* **
STHEET ADDIRESS	101 S. VICTORIA PARI		1.3 STREET ADDRESS		
CITY-ST-ZIP	MT. LANDSEDANE	PL 33301	1.4 CITY - ST - ZIP		
TOLE	VICE PRESIDENT	☐ DELETE	2.1 TITLE		Change Addition
NAME	KIM RAY KRUPHI	ac	2.2 NAME		
STREET ADDRESS	101 S. VICTORIA P	mek RD	2.3 STREET ADDRESS		
CHY+S1-7IP	FT LAUDBROME		2 4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
C(Ty - ST - Z(F)			3.4. CITY-ST-ZIP		
TITLE		L_J D€LEŦ€	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
Cilly-ST ZiP		DELETE	4.4 CITY-ST-ZIP		Colores C Addition
TITLE		L DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-ST ZIP TITLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		La Orango La zidonion
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP					
	L	ed with this filing does not gua	6.4 CITY-ST-ZIP	d in Section 119.07(3)(i), Florida Statutes. I f	further certify that the
informatio Lam an o	in indicated on this annual report or :	supplemental annual report is in the receiver or trustee empo	true and accurate and that wered to execute this repo	it my signature shall have the same legal effort as required by Chapter 607, Florida Statu	act as if made under eath: that I