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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Jan 23 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000044225 (6)

TURNING POINT PROMOTIONS, INC.

Principal Place 1700 SW 30TH FT LAUDERDAL	ST	Mailing Address 1700 SW 30TH ST FT LAUDERDALE FL 3331	15-2730		
				3. Date Incorporated or Qualified 05/17/1996	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address 26		4. FEI Number 65-0671145	Applied For Not Applicable
Suite, Apt.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30		Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
FRA	ser, russell		81 Name		
1700 SW 30TH ST FT LAUDERDALE FL 33315			82 Street A	ddress (P.O. Box Number is Not Acceptable	e)
			83		
			84 City		FL 85 Zip Code
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 famour with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or pointed framed of registered agent a within it implicable. (NOTE: Registered Agent signature required when reinstating). DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	DELETE	1.1 TITLE	ADDITIONO/OFFARIDED TO OFFICE	Change Addition
NAME	FRASER, RUSSELL		1.2 NAME		
STREET ADDRESS	1700 SW 30TH ST		1.3 STREET ADDRESS		
CiTY+S*-ZiP	FT LAUDERDALE FL 33315		1.4 CITY-ST-ZIP		
TITLE	110000000000000000000000000000000000000	DELETE	2.1 TITLE		Change Addition
NAME	i		2.2 NAME		<u> </u>
STREET ADDRESS			2.3 STREET ADDRESS		
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			52 NAME		
SZEROCA LEERTS			53 STREET ADDRESS		
CHY-SI-7IP			5 4 CITY - ST - ZIP		
TITLE		☐ DELETE	61 TiTLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHTY - ST - ZIF			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 and cated on this annual report or supplied enter a 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 and cated on this annual report or supplied enter an an another 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.