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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000046595 (0)

WEIRD STREET PRODUCTIONS, INC.

Principal Place of Business 915 CENTRAL AVENUE

Mailing Address

915 CENTRAL AVENUE

FILED May 13 1998 8:00am Secretary of State



ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3396350 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 F & L CORP. THE GREENLEAF BUILDING 82 Street Address (P.O. Box Number is Not Acceptable) 200 LAURA STREET 83 JACKSONVILLE FL 32202-3527 84 City 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, typed or printed have oil registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Ď 1.1 TITLE PRE Change Addition JOHNS, BRIAN NAME 1.2 NAME 915 CENTRAL AVENUE STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33713 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE JOHNS, LORI 2.2 NAME 915 CENTRAL AVENUE STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL 33713 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP DELETE 4 1 TITLE Change Addition TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY- ST-ZIP TITLE ☐ DELETE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this tung 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 supplicational 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 of the receiver of virieties of the processor of the corporation of the receiver of virieties. The receiver of virieties of the processor of the receiver of virieties of the processor of the receiver of virieties. The receiver of virieties of the receiver of virieties of the receiver of virieties of the receiver of virieties. The receiver of virieties of the receiver of virieties of the receiver of virieties of the receiver of virieties. The receiver of virieties of the receiver of virieties of the receiver of virieties of the receiver of virieties.

SIGNATURE:

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