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PROFIT CORPORATION ANNUAL REPORT 1997



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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 15 1997 8:00am Secretary of State

POP & MOP PRODUCTIONS, INC.	•
	HERBOOKEN ON DOOLE BROOK ERANGE BROOK

POP & N	MOP PRO	DUCTIONS, IN	C.									
Principal Place C/O M. CARLIS MIAMI FL 3316	c/	Mailing Address - C/O M. CARLISLE: 675 N.E. 115TH STREET - HIAM FL 63161						····				
											3. Date Incorporated or Qualified 3a. Date of Last Report 06/04/1996	
2. Principal Pl		ess	2a.	Mailing	Address					****	4. FEI Number Applied For	
27 675		155T	26							·····	65-0675 984 Not Applicable	
Suite, Apt 22	#, etc		27	PO	"Box	5.	3	0/	7	6	5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State		Pres	FC 28 1	City & S MINA	State	5+	101	2.5	23	FL	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
7ip 24 33/ 6		Country	29	Ζip 33 J	5.3	30	- •	untry	:A		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No	
		and Address of Cu	rrent Regis	tered A	ent						10. Name and Address of New Registered Agent	
AME	RILAWYER	CHARTERED						81	Name	е		
343	ALMERIA A'	VENUE						82	Stree	t Addre	ress (P.O. Box Number is Not Acceptable)	
								83	*****	********		
								84	City	**********	FL 85 Zip Code	
11. Pursuant to	to the provision	ons of Sections 607 ont, or both, in the S h, and accept the o	.0502 and 6	07 1508, da. Such	Florida Sta	atutes, as aut	the a	above ed by	-name the co	d corporation	poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE	(1) (g2) (() (g3) (4) (t)	n, and accept the o	ibligations of	, occioi	1007.0303,	Tione	ia Dia	iiules				
SIGNATURE	Signature, typed r	x printed hame of registers			e (I	NOTE: F			i Bignati	ire require	(red when reinstating) DATE	
12.	BOTO	OFFICERS	AND DIREC	CTORS	PELETE		13.			γ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
1015	PSTD	MUN A			DELETE		1.1 7			1	L.] Change L.] Addition	
NAME	CARLISLE	, JUNN A ARLISLE, 675 N.E	116TH C	TOEET			l	AME	1Dbaros		· · · · · · · · · · · · · · · ·	
STREET ADDRESS CATY+S1+ZIP	MIAMI FL		1101110	INGE				HTY-ST	ADDRESS	` 	\mathcal{Q}	
Ti'lf	Mill Ann 1 Pe		- 		DELETE		2.11		- 2)1		☐ Change ☐ Addition ☐	
NAME							2.2 N	iAME				
STREET ADDRESS							235	TAEET	ADDRESS	3		
C(TY -S(F-7)(*)							2.40	CITY - S	T-ZIP			
1011					DELETE		3.11	ITLE			Change Addition	
NAME							3.2 N	AME		1		
STREET ADDRESS							l		ADDRESS	3		
CHY-ST-7IP					Driete			CITY-S	T-ZIP		T Change Addition	
TITLE NAME					☐ DELETE		4.1.1	IILE Name		}	L Change Addition	
									ADORESS			
STREET ADDRESS CHTY+ST-70°							ŀ	OTY-ST				
TILLE					DELETE		5.1 1		-411		Change Addition	
NAME							1	IAME				
SUBSELLADORESS									ADDRESS	3		
CHY-SI ZII								HTY-ST				
Tille		· · · · · · · · · · · · · · · · · · ·			DELETE		6.1 T				Change Addition	
NAME							6.2 N	IAME				
STREET ADDRESS							6.3 \$	STREET A	ADDRESS	3		
CiTy+\$1-ZiP							6.40	ITY-SI	- ZIP			
14. I do heret	by certify that	the information sur	plied with th	nis filing	does not qu	ualify f	or the	exer	nption	stated	d 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 oals 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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