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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600056955 (3)

B R STARGAZER PRODUCTIONS, INC.

FILED May 04 1998 8:00am Secretary of State



									 	
Principal Place of Business Mailing Address										
4241 SE 53RD AVE OCALA FL 34480		4241 SE 53RD AVE OCALA FL 34480				DO NOT WRITE IN THIS SPACE				
1						3. Date Incorporated or Qualified		JI 7102		ח
						07/01/1996				
2. Principal P	Place of Business	2s. Mailing Address	2a. Mailing Address			4. FEI Number		A	oplied For	1
21		26				59-3393263		- -	ot Applicable	7
	W. Old.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	7
22		27	\\			5. Commodic of Glatos Educo	·		lequired	_
City & State	θ	City & State	28			6. Election Campaign Financing Trust Fund Contribution			May Be I to Fees	
Zip	Country Zip Con			ntry 8. This corporation owes or has paid the current year Intangib				~		
24	25 29 30					Personal Property Tax due June 30. Yes				4
	9. Name and Address of Curre	ant Registered Agent		81	Name	10. Name and Address of New Re	gistered	agent		┨
	ONE, RAYMOND D		ļ	" '	ivaille					Ţ
	41 SE 53RD AVE			82	Street Addi	ress (P.O. Box Number is Not Acceptable)				7
00	ALA FL 34480		}	63						┨
1										_
1			- 1	84	City		FL	85 Zip	Code	
l office or r	registered agent, or both, in the Stat	te of Florida. Such change was a	authorized	J by	the corporat	poration submits this statement for the place to be been submits this statement for the place.	ourpose of	changing ointment a	its registered s registered	1
	im familiar with, and accept the obli	gations of, Section 607.0505, Flo	orida Stati	utes	3.					1
SIGNATURE	Signature, typed or printed name of registered a	ment and little if applicable (NO)	I Begisteren	Ane	nt Signature reguer	rod when reinstating)	DATE			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		DIRECTO	R\$ IN 12	10/9/
TITLE	D	☐ DELETE	1.1 111	LF				Change	Addition	٦٤
NAME	BOONE, RAYMOND D		1.2 NA	1.2 NAME						
STREET ADDRESS	4241 SE 53RD AVE		1.3 \$1	REET	ADDRESS					R2E034
CITY-ST-ZIP	OCALA FL 34480		1.4 CIT	TY-S1	T- ZIP					187
TITLE	D	☐ DELETE	2.1 TIT	ΊE				Change	Addition	10
NAME	ROTHENBERGER, JOSEPH	C	2.2 NA							
STREET ADDRESS	10880 SE 129TH ST		1		ADDRESS	:				1
CITY-ST-ZIP	BELLEVIEW FL 34420	DELETE	2. 4 CI		IT-ZIP			Change	Addition	-
TITLE NAME		_ precit	3.1 TIT					U Change	reaction	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			3.4. CI		· 1					
TITLE		DELETE	4.1 TIT		1-611			Change	Addition	1
NAME		_	4, 2 NA						_	
STREET ADDRESS					ADDRESS					1
CITY-ST-ZIP			4.4 CIT		1					-
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	5.1 TIT					Change	Addition	1
NAME			5.2 NA	ME						
STREET ADDRESS			5.3 ST	REET	ADDRESS					
CITY-ST-ZIP			5.4 CIT	IY-S1	I-ZIP]
TULE		DELETE	6.1 TH	LE	-			Change	Addition	
NAME			6.2 NA	ME				•		
STREET ADDRESS			6.3 ST	REET /	ADDRESS					

14. I 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 trusted 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.

11/12/00