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 #
1. Corporation Name P96000058105 (3)

LYNNE HUDGINS PRODUCTIONS COMPANY

Principal Pl	ace of Bu	isinoss
9734 SW 2		RACE

Mailing Address

9734 SW 210TH TERRACE MIAMI FL 33189

FILED Mar 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1996 FEI Number

A 6: 1: (6)		10-11-			1 Ail Haao					
		2a. Mailing Address	lling Address		4. FEI Number	Applied For				
21		26			65-0680091			ot Applicable		
Suite, Apt.	ot. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 . Fee Re				
City & State					6. Election Campaign Financing		\$5.00	May Be		
23	28				Trust Fund Contribution			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 Currer	t Registered Agent			10. Name and Address of New Registered Agent					
HIII	OGINS, LYNNE		81	Name						
9734 SW 210TH TERRACE MIAMI FL 33189			82	82 Street Address (P.O. Box Number is Not Acceptable)						
			02	62 Street Address (F.O. Box Number is Not Acceptable)						
			83							
			<u> </u>				-1 1			
			84	City		FL	85 Zip (Code		
11 Pursuant t	to the provisions of Sections 607 050	2 and 607 1508. Florida Statut	es the abov	e-named corn	oration submits this statement for the		changing it	s registered		
office or re	egistered agent, or both, in the State	of Florida, Such change was a	authorized b	y the corporati	on's board of directors. I hereby acce	of the app	ointment as	registered		
agent. I a	miliamitia with, and accept the oblig.	1	orida Statute	s.		2/14	100	1		
SIGNATURE	Slovenure, prod or printing name of registered age	SO LYME !		<u>n ></u>	<u> </u>	2////	178			
		<u> </u>		ent signature require	ed when reinstating)	TOOL AND	DIDECTOR	CIN 10		
12.	OFFICERS AN	DELETE DELETE	13.	 _	ADDITIONS/CHANGES TO OFFI	JENS AND	Change	Addition		
	PDV	□ beene					L_I Ultariyo			
NAME	HUDGINS, LYNNE		1.2 NAME					[3		
STREET ADDRESS	9734 SW 210TH TERRACE		1.3 STREET	T ADDRESS				Įį		
CITY-ST-ZIP	MIAMI FL 33189		1.4 CITY-5	ST-ZIP			<u> </u>			
TITLE		☐ DELETE	2.1 TITLE	[Change	Addition		
NAME			2.2 NAME	1						
STREET ADDRESS			2.3 STAEE1	r address						
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP						
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition		
NAME			3.2 NAME	j)		
STREET ADDRESS			3.3 STREET	T ADDRESS						
CITY-ST-ZIP			3.4. CITY-	ST-ZIP						
TITLE		DELETE	4.1 TITLE				Change	Addition		
NAME			4. 2 NAME					ľ		
STREET ADDRESS			4.3 STREET	ADDRESS				-		
CITY-ST-ZIP	•		4.4 CITY - 9	ST-ZIP						
TITLE		DELETE	5.1 TITLE				Change	Addition		
NAME			5.2 NAME	}						
STREET ADDRESS			5.3 STREET	ADDRESS						
CITY+ST-ZIP			5.4 CITY - S							
TITLE	*	DELETE	6.1 TITLE				Change	Addition		
NAME		-	6.2 NAME	}			-			
STREET ADDRESS			6.3 STREET	ADDRESS						
CITY-ST-ZIP			6.4 CITY - S							
14. Thereby c	ertify that the information supplied w	th this filing does not qualify for	r the exemp	tion stated in S	Section 119.07(3)(i), Florida Statutes. I	further cer	tify that the	information		
indicated of officer or of	on this annual report or supplementa	I annual report is true and acciver or trustee empowered to	urate and th	at my signatur	e shall have the same legal effect as i ired by Chapter 607, Florida Statutes;	f made und	ler oath; tha	it lam an		

LUMBE LLILAINS