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

FILED May 07 1998 8:00am Secretary of State

1. Corporation	NEN # P9600 RODUCTIONS, INC.	0073376 (1)			il 1874 1888 1884 1884
Principal Place	e of Business	Mailing Address		I HORNHOOD HIN INITE BANK NOW WATER ONLY CONTRACTOR	DAD HINRA UNUN LADAD DAHA HADA
4168 WHITE PINE AVE. ORLANDO FL 32811		4168 WHITE PINE AVE. ORLANDO FL 32811		DO NOT WRITE IN THIS SPACE	
US				3. Date incorporated or Qualified	1
				08/30/1996	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3408357	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Ζφ 29	Country 30	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible X Yes No
	9, Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered	Agent
	ILL, LAURENCE C		81 Name		
4168 WHITE PINE AVE.			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
ORLANDO FL 32811			83		
			83		
			84 City	FL	85 Zip Code
11. Pursuant to the provisions of Sections 607 0502 and 607 0508, 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 Florigh. 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 507 0505, Florida Statutes. SIGNATURE					
SIGNATURE	generate typed or printed numeral registered as	real and fitte if applicable (NOT	E Begistered Agent signature requi	red when reinstating) DATE	-/-/
12.	OFFICERS AF	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	P	OFTE	1.1 TOTLE		Change Addition
NAME	STILL, LAURENCE C		1.2 NAME		į,
STREET ADDRESS	4168 WHITE PINE AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ORLANDO FL RA	DELETE	1.4 CITY-S1-ZIP 2.1 TITLE		Change Addition
NAME	STILL, LAURENCE C	LJ Witti	2.2 NAME		C orange C Modelon
STREET ADDRESS	4168 WHITE PINE AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY - ST - ZIP		İ
TITLE		DITLETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-\$T-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE"	4.1 THILE		L Change L Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		I btatte	4 4 CITY - ST - ZIP		Change
TITLE		Delete	5.1 TITLE		Change Addition
NAME CTREET ADDRESS			5.2 NAME		ļ
STREET ADDRESS			5.3 STREET ADDRESS		į
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		Ì
34 1		- 11 M - 21		Section 110 07/2)(i) Florida Statutos Hurther of	and the control of th

Inereoy ceruly that the information supplied with this hing 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 trustee empowered to execute this report is 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.