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Mailing Address

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortiam'

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

DOCUMENT # P96000084144 (0)

D.D.R. ENTERTAINMENT, INC.

50 EAST CENTRAL BLVD. 50 EAST CENTRAL BLVD. SUITE A SUITE A ORLANDO FL 32801 ORLANDO FL 32801-2445 3. Date Incorporated or Qualified 3a. Date of Last Report 10/09/1996 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution П 23 28 Added to Fees Country $Z_{\rm IP}$ Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SIMINOU, DAVID 50 EAST CENTRAL BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A В3 ORLANDO FL 32801 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. 5 grashire Typed or profest name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TILLE 32E034 SIMINOU, S D 1.2 NAME NAM: 50 EAST CENTRAL BLVD. SUITE A STREET ADDRESS 1.3 STREET ADORESS ORLANDO FL 32801 1.4 CITY-ST-ZIP CITY - ST - ZIE DELETE TITLE 2.1 TITLE Change Addition GRAZIANO, DAVID M 2.2 NAME NAME 424 DELANEY PARK DRIVE 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32806 2.4 CITY-ST-ZIP CHY-S1-ZIP DELETE ☐ Change Addition TifLE 3.1 TITLE NAME KHOSHNOU. FARAMARZ R 3.2 NAME STREET ADDRESS 50 EAST CENTRAL BLVD. SUITE A 3.3 STREET ADDRESS ORLANDO FL 32801 C:TY - ST - ZIP 34. CITY-ST-ZIP DELETE Change Addition THILE 4.1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP COY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIE 5.4 CITY-ST-ZIP DELETE THE 6.1 TITLE ☐ Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - \$1 - ZiP 6.4 CITY - ST - ZIP

14. I do 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED PARTIED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/17

4-7-8849-649-1

FILED

Apr 04 1997 8:00am

Secretary of State