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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000085594 (5)

SHOBIZPRO ENTERTAINMENT, INC.

Principal Place of Business

Mailing Address

FILED Apr 15 1997 8:00am Secretary of State



6543 DOUBLETRACE LANE ORLANDO FL 32819		8543 DOUBLETRACE LANE ORLANDO FL 32819-4653					
					3. Date Incorporated or Qualified 10/14/1996	3a. Date of Last	Report
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21 5310 FXYWOOD COURT 26 5310 FAYL			woon Co	URT	59-3404810		Not Applicable
Suite, Apt 12 EXEC	urive Suire		27 EXECUTIVE SUITE		5. Cerlificate of Status Desired	\$8.75 Addition Fee Required	
City & State	euro, FC	City & State 28 ORCANOD,	Fc.		Election Campaign Financing Trust Fund Contribution		May Be d to Fees
24 32E	319 25 ORANGE	^{Zip} 52 <i>B1</i> 9	Country 30 ORA	NGE		Yes No	s. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
MAL	ick, keith i		[81] N	lame			
6543 ORL		treet Addre	ss (P.O. Box Number is Not Acceptable FAY WOOD COULT	Not Acceptable) CoveT			
			83	Execu	itive Suite	·····	
			84 0	BRIA	NAO	FL 85 3	o Code 28/9
11. Pyrsuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the above-na	amed corpo	oration submits this statement for the p	urnose of changing	its registered
office or c agent 1 a	registered agent, or both, in the Stat im familiar with land accept the oblig	e of Florida. Such change was pations of, Section ∞ 07,0505, F	authorized by the locida Statutes.	e corporatio	on's board of directors. I hereby accep	t the appointment	as registered
SIGNATURE	KAITH I MALICK	Kuth	I. elas	ud		1/15/97	
SIGNATION	Signature, typed or posted name of ingisternd as	ont and the if applicable (NC	TE: Registered Agent si		d when reins(ating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
12. Մեն	D	VD DIRECTORS DELETE	13. 1.1 TITLE	, , ,	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECT	
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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 this corporation or the receiver or trustee 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.