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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000011784 (0)

FILED Apr 20 1998 8:00am Secretary of State

TEN STAR PRODUCTIONS, INC. Principal Place of Business Mailing Address 475 EAST EAU GALLIE BLVD P.O. BOX 410051 INDIAN HARBOR BEACH FL 32937 MELBOURNE FL 32941-0051 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/05/1997 2. Principal Place of Business 2a. Mailing Address Applied For 59-3430129 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name A1 LEVERICH, CHARLES JR 476 EAST EAU GALLIE BLVD Street Address (P.O. Box Number is Not Acceptable) 82 INDIAN HARBOR BEACH FL 32937 83 84 City 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 txith, 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition D Change TITLE 1.1 TITLE LEVERICH, CHARLES A JR NAME 12 NAME 475 EAST EAU GALLIE BLVD STREET ADDRESS 13 STREET ADDRESS INDIAN HARBOR BEACH FL 32937 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE PAVIAKOS, JOHN A 2.2 NAME NAME STREET ADDRESS 475 EAST EAU GALLIE BLVD 2.3 STREET ADDRESS **INDIAN HARBOR BEACH FL 32937** 2 4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Addition 4 1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TiTLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of place 14 of place 13 of place 13 of place 14 of place 14

Block 12 of Block 13 of Charles & Security of the receiver of the security of

/KZEUS4 (10/97)