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

PROFIT CORPORATION ANNUAL REPORT

1998

A PARTY



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700034703 (3)

APPLEPIE ENTERTAINMENT CORP.

Principal Place of Business Mailing Address 5432 NORTHEAST 21ST TERRACE 5432 NORTHEAST 21ST TERRACE FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/17/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0745653 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No Zip Country  $Z_{iD}$ Country 24 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AMERILAWYER CHARTERED PtiTo Frankhin 343 **ALM**ERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 CORAL GABLES FL 33134 83 84 Zip Code 33308 derdule 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 family on the analysis of Section 607.0505, Florida Statutes. trank Ptito, bresident 4-20-98 **SIGNATURE** gistered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSTD DELETE TITLE 1.1 TITLE ☐ Change Addition PTITO, FRANLIN NAME 1.2 NAME **5432 NORTHEAST 21ST TERRACE** STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33308 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE ☐ Change TITLE 21 TITLE Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 31 TITLE Change Addition 32 NAME STREET ADDRESS 3.3 STREET ADDRESS

6.4 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 12 or Block 13 if chapted, or on an attachment with an address.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

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6.2 NAME

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Apr 27 1998 8:00am

Secretary of State