

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


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Jan 16 1998 8:00am
Secretary of State



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PROFIT CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000046770 (8)
1. Corporation Name
TRIPNOSIS STUDIO PRODUCTIONS, INC.

Principal Place of Business
4399 FLAX COURT
PALM BEACH GARDENS FL 33410

Mailing Address
4399 FLAX COURT
PALM BEACH GARDENS FL 33410

2. Principal Place of Business
21 4399 Flax Ct
Suite, Apt. #, etc.
22
City & State
23 Palm Beach Gardens, FL
Zip Country
24 33410 25 US

2a. Mailing Address
26 4399 Flax Ct
Suite, Apt. #, etc.
27
City & State
28 Palm Beach Gardens, FL
Zip Country
29 33410 30 US

3. Date Incorporated or Qualified
05/27/1997

4. FEI Number
65-0762588
Applied For
Not Applicable

5. Certificate of Status Desired
\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.
Yes No

9. Name and Address of Current Registered Agent
PITCHFORD, SCOTT C
4399 FLAX COURT
PALM BEACH GARDENS FL 33410

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE

12. OFFICERS AND DIRECTORS
TITLE D DELETE
NAME PITCHFORD, SCOTT C
STREET ADDRESS 4399 FLAX COURT
CITY-ST-ZIP PALM BEACH GARDENS FL 33410
TITLE D DELETE
NAME PITCHFORD, TYLER K
STREET ADDRESS 4399 FLAX COURT
CITY-ST-ZIP PALM BEACH GARDENS FL 33410
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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CB2E034 (10/97)

14. I 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 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.

SIGNATURE: [Signature] **DATE REQUIRED**

12/31/97 (561) 694-6181