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

PROFIT: CORPORATION ... ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000049114

1. Corporation Name

ENTERTAINING SITUATIONS INTERNATIONAL INCORPORAT

									so ali po rik ob iak	B 0 0 0 0 50	1784 BIBI 1884	
Principal Place of Business Mailing Address							1					
2620 NW 67 ST			2620 NW 67 ST						,	•		
MIAMI FL 33147			MIAMI FL 33147				-	DO NOT WRITE IN THIS SPACE				
ł	,							3. Date Incorporated or Qualife				
								06/03/1997				
2 Principal Pl	ace of Business	2a.	Mailing Address			_	-+	4. FEI Number		An	plied For	
1						1	65-0798241			t Applicable		
26 Suite, Apt. #, etc. Suite, Apt. #, etc.							-+	03 07 302 4 1		\$8.75		
22 27								5. Certifcate of Status Desired		Fee Re		
City & State City & State								6. Election Campaign Financing		¢5 00		
23 28								Trust Fund Contribution			\$5.00 May Be Added to Fees	
Zip	Country		Zip	Countr	v			8. This corporation owes the cu	rrent vear Inf			
24		29		30 ~	•	_		Personal Property Tax.		Yes	□No ·	
9. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
				81	1	Name						
THO	MPSON, CHARLES JR.				1							
2620 NW 67 ST				82	2	Street A	Address	(P.O. Box Number is Not Accept	itable)			
	AI FL 33147			83	3							
}												
İ				84	4	City			FI	85 Zip (Code	
44-5	to the provisions of Sections 607.0		7 4500 51-14- 04-4-4	466				tion - broits this statement for th		- Lohanging its	registered	
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	te of Florida	a. Such change was a	uthorized by	ye-i y th	натнест не согро	oration's	s board of directors. I hereby acc	ept the appoi	intment as re	gistered	
agent. I a	m familiar with, and accept the obli	gations of,	Section 607.0505, Flor	rida Statute	S.							
SIGNATURE									DATE			
	Signature, typed or printed name of registered a OFFICERS			Registered Age	ent s	signature re	equined wh	ADDITIONS/CHANGES TO C		IN DIRECTO	RS IN 12	
12.	VP OFFICERS	IND DIREC	DELETE	1,† TITLE			D.,	sident	T TOLITO A	Change	Addition	
TITLE	••		C DULLIE	1		1	l Na	vid Wright		C ondinge		
NAME '	HENRY, ROBERT			1.2 NAME			OAC	to NM 63 st.		•		
STREET ADDRESS	2620 N.W. 67 ST.			1.9 STREE								
CITY-ST-ZIP	MIAMI FL 33147			1.4 CITY-		ZIP	Mi e	m; FL 33147		74 Change	Addition	
TITLE			2.1 TITLE		- 1	Vice	President	. T.				
NAME			2.2 NAME	22 NAME		Cha	rlie S. Thompso	n ar.				
STREET ADDRESS	2620 N.W. 67 ST.			2.3 STREE	ET A			O NW 67 St.				
CITY-ST-ZIP	MIAMI FL 33147			2, 4 CITY-	ST-	ZIP (MIA	mi Fl 33147				
TITLE			□ DELETE	3.1 TITLE						Change	☐ Addition	
NAME _				- 3.2 NAME					,			
STREET ADDRESS	•			3.3 STREE	ĘΤΑ	DORESS						
CITY-ST-ZIP				3.4. CITY-	ST-	ZIP	_					
πιε			☐ DELETE	4.1 TITLE						Change	☐ Addition	
NAME	•			4, 2 NAME	Ε.	- 1						
STREET ADDRESS				4.3 STREE	ETA	ODRESS						
CITY-ST-ZIP				4.4 CITY-	ST-Z	ZIP)						
TITLE			☐ DELETE	5.1 TITLE						Change	☐ Addition	
NAME !	,			5.2 NAME								
STREET ADDRESS				5.3 STREE	ETA	(DORESS						
CITY-ST-ZIP	•			5.4 CITY-	ST-2	ZIP						
TILE			☐ DELETE	6.1 TATLE		-				☐ Change	☐ Addition	

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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90110 044 ***185.00

954-704-0951