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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000051209 (9)

MIAMIT	FILM CONNECTION, INC	9			
Principal Place	e of Business	Mailing Address			E HORKOOR ING KARA NODIK ODIKI ODIKI ODIKI ODIGE DIJUE HAND HANK ODIKA #011 1001
15020 SW 48		15020 SW 48 TERR/	ACE.		
#F	TETHINGS	#F	nv£		
MIAMI FL 33185 MIAMI FL 33185					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
9 Dringing D	lace of Business	2a. Mailing Address			06/10/1997 4. FEI Number   Applied For
21 21	idue of Business	<b>⊢</b>			
Suite, Apt.	# etc	26 Suite, Apt. #, etc			♥ 7E Additional
22	., 010	27	<del></del>		5. Certificate of Status Desired Fee Required
City & State	9	City & State			Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Registered Agent
LOF	PEZ, CARLOS D		ļ	Name	ne .
	20 SW 48 TERRACE		l.	32 Street	et Address (P.O. Box Number is Not Acceptable)
#F			L		
MIA	MI FL 33185		1	33	
			h	34 City	85 Zip Code
				J. Only	FL 18 1 19 Code
11. Pursuant t	to the provisions of Sections 607.	.0502 and 607.1508, Florida S	statutes, the ab	ove-named	ed corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
agent. La	m familiar with, and accept the ol	bligations of, Section 607.050	5, Florida Statu	tes.	orporations board of directors. Thereby accept the appointment as registered
SIGNATURE					
	Signature typed or printed name of registered			Agent signatur	nture required when reinstating) DATE
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12    PRESIDENT   DIRECTOR   Change   Addition
TITLE	PTD CARLOS D	☐ DELETE			PRESIDENT 9 DIRECTOR Change Addition
NAME	LOPEZ, CARLOS D	46	1.2 NAM		HATOPP (#F)
STREET ADDRESS	15020 SW 48 TERRACE, 4	#F		EET ADDRESS	MIAMI FL 33/85
CITY-ST-ZIP	MIAMI FL 33185	DELETE		-ST-ZIP	VICE POSS a SECRETARY Change MAddition
TITLE		™ NECELE			
NAME			2.2 NAM		MAGALY INCERA 15000 SW 48 TERE (#F)
STREET ADDRESS				EET ADDRESS	minni El 23/05
CITY-ST-ZIP		DELETE		Y-ST-ZIP	Miami, FL 33185  Vice Ples & TREASURER ☐ Change ☐ Add-tion
TITLE		C) Otten	L · · · ·		
NAME CINTER ADDRESS			32 NAM		MANUEL B. LOPEZ goi sw 37 Ave (#23)
STREET ADDRESS				EET ADDRESS	Miami, FL 33136
CITY-ST-ZIP TITLE		DELETE		Y - ST - ZIP	Change Addition
=		™1 AETE (E	4.1 TITL 4.2 NAI		- Change - Notified
NAME OTREET ADDRESS					
STREET ADDRESS				EET ADDRESS	10
CITY-ST-ZIP TITLE		DELETE		'-ST-ZIP	Change Addition
			5.1 MAN		j onongo Ca Madinon
NAME					
STREET ADDRESS				EET ADDRESS	23
CITY-ST-ZIP TITLE		DELETE		'-ST-ZIP F	Change Addition
					E Colladgo E Poblitado
NAME STOCKS ADDRESS			6.2 NAN		
STREET ADDRESS			6.3 STR	ET ADDRESS	3

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 chapter 607, or on an attachment with an address.

3/2/00 (201) 867-2225

**FILED** 

Apr 06 1998 8:00am

Secretary of State