

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Jul 08, 1999 8:00 am**  
**Secretary of State**

07-08-1999 90016 042 \*\*\*150.00

DOCUMENT # **P97000052714** ✓  
Corporation Name

**ANDERSON GREENE ENTERTAINMENT, INC.**



Principal Place of Business  
10 WASHINGTON AVE  
SUITE 245  
MIAMI BEACH FL 33139

Mailing Address  
1210 WASHINGTON AVE  
245  
MIAMI BEACH FL 33139  
US

DO NOT WRITE IN THIS SPACE

Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29

3. Date Incorporated or Qualified

**06/16/1997**

4. FEI Number

**65-0775818**

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 the current year  
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FREEDMAN, JOAN**  
**5710 SANTIAGO CIRCLE**  
**BOCA RATON FL 33433**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

I, 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 reinstating)

DATE

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME ☐ DELETE  
D  
FREEDMAN, JOAN  
2. STREET ADDRESS  
5710 SANTIAGO CIRCLE  
3. CITY-STATE-ZIP  
BOCA RATON FL 33433

1. NAME ☐ DELETE  
D  
GREENE, W. ANDERSON  
2. STREET ADDRESS  
529 MICHIGAN AVE #1  
3. CITY-STATE-ZIP  
MIAMI BEACH FL 33139

1. NAME ☐ DELETE  
D  
BINNICKER, BONNIE  
2. STREET ADDRESS  
11810 NW 5TH ST  
3. CITY-STATE-ZIP  
PLANTATION FL 33325

1. NAME ☐ DELETE  
2. STREET ADDRESS  
3. CITY-STATE-ZIP

1. NAME ☐ DELETE  
2. STREET ADDRESS  
3. CITY-STATE-ZIP

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7/8/2/99** (305) 674-9881

Date

Daytime Phone #

CR2E034 (5/99)



S83456-90016-42  
P97000052714

1210 washington avenue suite 245. miami beach, florida 33139 U.S.A. tel.305.674.9881 fax 305.674.9224

July 2, 1999

Annual Report Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs:

Enclosed is our filing for 1999. I received this in the mail yesterday and called your office as I thought I had paid this in September of 1998. I did not realize that payment was for 1988. I did not receive an annual report packet in the mail in January and it never occurred to me that this was a problem. When I spoke to your office today, I was told to sent the packet in immediately with a check for \$150. I am doing so and apologize for the confusion. We are a new company and will now know better.

Thank you.

Bonnie Binnicker