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 # P97000060294 (0)

FILED Mar 19 1998 8:00am Secretary of State

SIGN AND ALE SIGN	PROGI	RESSIVE SCENIC STUDIO, I	NC.					
Stock AND ANE	Principal Place of Business Mailura Address					- I LODINGO ALE LINGO PARE LODES DONI BURILO DE PRE	J BIJILI va klu libiu ludi	H BIBT HEST
2, Principal Place of Business 2a Multing Address 5.9 - 3.45.57.65 Day load Formation 2.0 Day load Formation 2.	8103 ANNO AVE		6103 ANNO AVE		DO NOT WRITE IN THIS SPACE			
A. FEI Number Applied For Suite Sp - 3 x 5 5 7 6 5 Not Applied For Suite Sp - 3 x 5 5 7 6 5 Not Applied For Suite Sp - 3 x 5 5 7 6 5 Not Applied For Suite Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 5 7 6 5 Not Applied For Sp - 3 x 5 7 6						,		
Suito, Apt. #, etc.								
Suite, Apt #, etc. Suite, Apt #, etc. Suite, Apt #, etc. Site, Apt #, etc. Si	<u> </u>		2a. Mailing Address	2a. Mailing Address				
27						59-3455/65		
City & State 28			- n		5. Certificate of Status Desired	* • · · · · ·		
28						Flection Compaign Financing		<u> </u>
Zq				······				
28								
B. Herne and Address of Current Registered Agent GRESS, JACQUELINE L 1338 SPRINGWOOD CR LONGWOOD FL 32750 10		},		30		Personal Property Tax due June 30.	🗌 Yes 🔀	
SIGNATURE 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registere office or registered agent, or both, in the State of Londes Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Londes Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Londes Stat						10. Name and Address of New Register	ed Agent	
1338 SPRINGWOOD CIR LONGWOOD FL 32750 82 Street Address (P.O. Box Number is Not Acceptable)	Gl	RESS, JACQUELINE L		81 (Name			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Londa. Such change was authorized by the corporation's board of directors. Thereby secopt the appointment as registered agent and familiar with and accept the change from the state of Londa. Such change was authorized by the corporation's board of directors. Thereby secopt the appointment as registered agent and trained with an advantage treatment displantage registered agent agreement and remaining.	13	I3B SPRINGWOOD CIR		82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
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 agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby scoept the appointment as registered agent, or both, in the State of Florida Statutes of provided by the corporation's board of directors. I hereby scoept the appointment as registered agent and accept the objectives of Scotton 607 0505. [bridge Statutes of provided State of Change of Chan	LC	DNGWOOD FL 32750				·		
The provisions of Sections 607 (907) end 607, 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Londa. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE				83				
The prevention to the provisions of Sections 607 0502 and 607 1508 Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont, or both, in the Statut of Lectrical, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont and sectory the objections of, Section 607 0505, Florida Statutes. SIGNATURE				84	City		85 Zip C	ode
SIGNATURE Signators have been produced agent, or both, in the State of Torings South Or 25005, Florida Statutes. SIGNATURE Signators have been produced agent, or both, in the State of Torings Southor Or 25005, Florida Statutes. SIGNATURE Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent agent and size if acquis-value. Signators have been produced agent								realstand
SIGNATURE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	11. Pursuant	to the provisions of Sections 607 0502 registered agent, or both, in the State	2 and 607,1508, Florida Statu of Florida. Such change was	utes, the above-r authorized by the	named corpo he corporation	oration submits this statement for the purpos on's board of directors. I hereby accept the i	e of changing its appointment as r	registered egistered
12. OF LICE AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	agent. I a	im familiar with, and accept the obliga	itions of, Section 607.0505, F	lorida Statutes.	,	•		•
12.	SIGNATURE					CAY		
Title	10				signature require			S IN 12
MAME Jacqueline Gress 12 NAME 13 STREET ADDRESS 133B Springwood Circle 13 STREET ADDRESS 14 CITY-ST-ZIP Changwood, FL 32750 DELETE 27 NAME 27 NA					Т	Habitiotogoti i itozo (o ott. iob.io)		Addition
STREET ADDRESS 133B Spring Wood Circle 135TREET ADDRESS 14CHY-ST-ZIP		1 .	_	12 NAME				
City-St-ZiP				•				
TillE	***************************************	Longwood FL 32750)					
NAME STREET ADDRESS 1338 Springwood Circle 23 STREET ADDRESS 2 4 CITY-ST-ZIP							Change	Addition
STREET ADDRESS 133B Springwood Circle 23STREET ADDRESS 24 CITY-ST-ZIP				2.2 NAME				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE Addition Addition TITLE ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP ADDRESS CITY-ST	STREET ADDRESS	133B Springwood Circle		2 3 STREET AL	DORESS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE Addition Addition TITLE ADDRESS CITY-ST-ZIP TITLE DELETE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP ADDRESS CITY-ST	CITY-ST-ZIP	Longwood, FL 32750)	2 4 CITY - ST-	- ZIP			
STREET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP	TITLE			3 1 TITLE			Change	Addition
City-St-ZiP	NAME			3.2 NAME				
TITLE	STREET ADDRESS	MESS		3 3 STREET AL	DDRESS			
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE S1 STREET ADDRESS CITY-ST-ZIP TITLE S2 NAME S7REET ADDRESS CITY-ST-ZIP TITLE S3 STREET ADDRESS CITY-ST-ZIP TITLE S4 CITY-ST-ZIP S5 ADDRESS S7 STREET ADDRESS	CITY-ST-ZIP			3 4. CITY - ST-	- ZIP			
STREET ADDRESS 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP	TITLE		☐ DELETE				L_I Change	☐ Addition
A CITY-ST-ZIP	NAME							
TITLE DELETE 51 TIFLE Change Addition NAME 52 NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE Change Addition NAME 62 NAME 62 NAME 63 STREET ADDRESS 63 STREET AD	STREET ADDRESS	DORESS						
NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 61 TITLE STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS			T Bri Fin				Change	Addition
STREE1 ADDRESS			TI DELETE	1	1		FTT CHANGE	L.J ∧JURIURI
CITY-ST-ZIP TITLE DELETE 61 TITLE NAME STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS				1	DD0160			
TITLE DELETE 61TITLE Change Additive 62 NAME 62 NAME 63 STREET ADDRESS 63 STREET ADDRESS								
NAME STREET ADDRESS 62 NAME 63 STREET ADDRESS			T herere		ZIP		Change	Addition
STREET ADDRESS 63 STREET ADDRESS			L') privit				C Divingo	
					nnpree			
EADITY OF THE				1				
64 CITY-ST-ZIP 6.1 CITY-ST-ZIP 6.2 CITY-ST-ZIP 6.3 CITY-ST-ZIP 6.4 CITY-ST-ZIP	14. hereby	certify that the information supplied wi	ith this filing does not qualify			Section 119.07(3)(i), Florida Statutes. I furthe	r certify that the	information

indicated on this annual report or suppressent a mittar report is true and accurate and that my signature sharinate regardence as it made under oath; that I am a officer or director of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapters or on an attachment with an address.