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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. **Mortham** 

**FILED** 

Mar 27 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT. # .. P9700064829 (9)

STUDIO DOWNTOWN, INC.

Principal Place of Business				Mailing Address				
1210 WEST ROBINSON STREET				1210 WEST ROBINSON STREET				
ORLANDO FL 32805			ORLANDO FL 32805					DO MOT MIDITO IN TURO PRACE
								DO NOT WRITE IN THIS SPACE
								3. Date Incorporated or Qualified
				Mailing Addrson				07/28/1997 4. FEI Number Applied For
2. Principal Place of Business				2a. Mailing Address				59-3458846 Not Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				¢0.75 4.4%1
<b>—</b>				27				5. Certificate of Status Desired Fee Regulred
City & State			[27]	City & State				6. Election Campaign Financing \$5.00 May Be
23				28				Trust Fund Contribution
Zip	Zip Country			Zip Count			,	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 Currer	nt Regis	tered Agent				10. Name and Address of New Registered Agent
DF	ASON, ANI	NE E				81	Name	ne e
		OBINSON STREET				82	Street	et Address (P.O. Box Number is Not Acceptable)
ORLANDO FL 32805							O.roor.	of Addition (1.10. Box Hallings, 10.1101. Godphillio)
•						В3		
						84	City	85 Zip Code
								FL   `   `
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named office or registered agent, or both, in the State of Florida. Such change was authorized by the corp.</li> </ol>							ed corporation submits this statement for the purpose of changing its registered	
office or r	regi <b>ste</b> red ag ım <b>la</b> miliar w	gent, or both, in the State ith, and accept the oblig	e of Fight ations of	sa. Such change was L Section 607.05 <b>05</b> , F	lorida Sta	atutes	) the corp s.	opporations board of directors. Thereby accept the appointment as registered
SIGNATURE		. , ,						
SIGNATURE	Signature, typed	d or printed name of registered ag	ent and title	d applicable (NO	1E. Register	ed Age	ent signature	ture required when reinstating) DATE
12.	<del></del>	OFFICERS AN	D DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	į				ITLE		Anne Deason St.	
NAME						1.2 NAME		Anne Delison St.
STREET ADDRESS						1.3 STREET ADDRESS		Orlando, FL 32805
CITY-ST-ZIP				Deter		CITY - S	T-ZIP	Orlando, FL 32805
TITLE				☐ DELETE				Change C Addition
NAME						2.2 NAME 2.3 STREET ADDRESS		
STREET ADDRESS	ł							\$\$
CITY-ST-ZIP	<del>  -</del>			DELETE			ST-ZIP	Change Addition
TITLE						HTLE		
NAME						NAME	**********	20
STREET ADDRESS	]				1		ADDRESS	,
CITY-ST-ZIP	<b></b>			DELETE		CHY-:	ST-ZIP	Change Addition
TITLE	İ			CT DELETE		NAME		
NAME	İ						ADDDCCC	
STREET ADDRESS						DITY-S	ADDRESS	35
CITY-ST-ZIP TITLE				DELETE		TITLE	51 - £IF	☐ Change ☐ Addition
NAME	1					NAME		_ · _
STREET ADDRESS							ADDRESS	ss
						DITY-S		~
CITY-ST-ZIP TITLE	<del></del>			DELETE		TITLE	)1 ° £#	Change Addition
NAME						NAME		
STREET ADDRESS							ADDRESS	22
SINCE I ADUNESS	1				0.3	J.114.L.		~ <u>}</u>

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.