## 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 # P97000078050

1. Corporation Name

FORREST FILMS INC.

## Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90010 016 \*\*\*150.00



Principal Place	e of Rusiness	Mailing Address					H WEELL WELL) II	IBBL IBIIX BBIB)	8) 115 <b>6</b> 011 1 <b>00</b> 1	
1933 HARTFORD CT 1933 HARTFORD										
WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33			L 33409							
						DO NOT WRIT	E IN THIS	SPACE		
		•				<ol><li>Date Incorporated or Qualifed 09/08/1997</li></ol>				
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		I Api	plied For	
· ·	ace of business	26				65-0777986			t Applicable	
21 Suite, Apt.	# etc	Suite, Apt. #, etc.					~	\$8.75	dditional	
22		27				5. Certificate of Status Desired		Fee Re		
City & State	e ·	City & State				6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution		Added to	o Fees	
Zip	Country	Zip	Cou	untry		8. This corporation owes the curre	ent year Inta	angible	"	
24	25	29	9 30			Personal Property Tax.		Yes	□No	
	9. Name and Address of Curren	t Registered Agent		1		10. Name and Address of New R	egistered /	Agent		
				81	Name					
	EL, JIMMY W			82	Street A	ddress (P.O. Box Number is Not Accepta	ble)		_	
	B HARTFORD CT					Tess (F.O. Box Number is Not Acceptable)				
WES	ST PALM BEACH FL 33409			83	_					
				84	City.			85 Zip C	`ode	
				194	City		FL	163 Zip C	,000	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida S	tatutes, the a	above	e-named c	orporation submits this statement for the	purpose of	changing its	registered	
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change w	as authorize	a by i	tne corbor	ration's board of directors. I hereby accep	t the appoir	itment as re	gistered	
			. Florida Stat	tutes.						
_	in latinial will, and accept the obliga	idons of, Section oor.0303	, Florida Stat	tutes.						
SIGNATURE	Signature, typed or printed name of registered age		, Florida Stat	tutes.	•	quired when reinstating)	DATE			(0
SIGNATURE	Signature, typed or printed name of registered age		, Florida Stat	tutes. d Ageni	•	quired when reinstating) ADDITIONS/CHANGES TO OFI				1,00)
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (	NOTE: Registered	tutes. d Ageni	•			D DIRECTO ☐ Change	RS IN 12	(44/00)
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (	NOTE: Registered  13. E 1.1 T	tutes. d Ageni	•					134 (44/09)
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE: Registered  13. E 1.1 T	d Ageni TILE IAME	•					144/00)
SIGNATURE  12.  TITLE  NAME	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W	nt and title if applicable. (ID DIRECTORS DELET	NOTE: Registered  13. E 1.1 T 1.2 N 1.3 S 1.4 C	d Ageni TILE IAME	it signature req			Change	Addition	(00/14/00)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE: Registered  13. E 1.1 T 1.2 N 1.3 S 1.4 C	d Agend TITLE IAME	it signature req					CB2F034 (11/08)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. (ID DIRECTORS DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T	d Agend TILE IAME STREET	it signature req			Change	Addition	CB2E034 (11/08)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. (ID DIRECTORS DELET	NOTE: Registere  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N	d Agend TILE IAME STREET TITLE TITLE	it signature req			Change	Addition	(PDDE034 (11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE: Registere  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S	d Agend TILE IAME STREET TITLE TITLE	ADDRESS			☐ Change	Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. (ID DIRECTORS DELET	NOTE: Registere  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S	d Agent TILE IAME STREET TILE VAME STREET	ADDRESS			Change	Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE Registere  13. E 1.17 12.N 1.3.S 1.4.C E 2.17 22.N 2.3.S 2.4.C E 3.17	d Agent TILE IAME STREET TILE VAME STREET	ADDRESS			☐ Change	Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T 22.N 2.3.S 2.4.C E 3.1 T 3.2.N	d Agent TITLE IAME STREET TITLE VAME STREET TITLE VAME STREET TITLE VAME STREET	ADDRESS			☐ Change	Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T 22.N 2.3.S 2.4.C E 3.1 T 32.N 3.3.S	d Agent TITLE IAME STREET TITLE VAME STREET TITLE VAME STREET TITLE VAME STREET	T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change	Addition Addition Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	nt and title if applicable. ( ID DIRECTORS  DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T 22.N 2.3.S 2.4.C E 3.1 T 32.N 3.3.S 3.4.C	d Agent  TITLE  LAME STREET  TITLE  LAME STREET  LAME STREET  LAME STREET  STREET  LAME  STREET	T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change	Addition	(14,08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	int and title if applicable.  ID DIRECTORS  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S 2.4 C E 3.1 T 3.2 N 3.3 S 3.4 C E 4.1 T	d Agent  TITLE  AME  STREET  CITY-ST  TITLE  LAME  STREET  CITY-S  CIT	T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change	Addition Addition Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	int and title if applicable.  ID DIRECTORS  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S 2.4 C E 3.1 T 32 N 3.3 S 3.4 C E 4.1 T	ITLE  ITTLE  IAME  CITY-ST  ITTLE  IAME  CITY-ST  ITTLE  IAME  CITY-ST  ITTLE  IAME  CITY-ST  ITTLE  IAME  I	T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change	Addition Addition Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	In and title if applicable.  ID DIRECTORS  DELET  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S 2.4 C E 3.1 T 32 N 3.3 S 3.4 C E 4.1 T 4.2 C 4.3 S	ITLE  ITTLE  IAME  CITY-ST  ITTLE  IAME  CITY-ST  ITTLE  IAME  CITY-ST  ITTLE  IAME  CITY-ST  ITTLE  IAME  I	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	(14/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	int and title if applicable.  ID DIRECTORS  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T 22.N 2.3.S 2.4.C E 3.1 T 3.2.N 3.3.S 3.4.C E 4.1 T 4.2.C 4.3.S	d Agent ITLE IAME STREET ITLE VAME STREET CITY-ST ITLE VAME STREET CITY-S ITLE VAME STREET CITY-S ITLE VAME STREET CITY-S ITLE VAME STREET CITY-S ITLE VAME STREET TITLE VAME STREET TITLE VAME STREET TITLE VAME STREET TITLE	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change	Addition Addition Addition	(11/08)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	In and title if applicable.  ID DIRECTORS  DELET  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T 22.N 2.3.S 2.4.C E 3.1 T 3.2.N 3.3.S 3.4.C E 4.1 T 4.2.C 4.3.S	d Agent ITLE IAME STREET TITLE IAME STREET TITLE IAME STREET TITLE IAME STREET STREET STREET CITY-S' TITLE IAME STREET CITY-S' TITLE IAME STREET CITY-S' TITLE IAME STREET CITY-S' TITLE IAME	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	(11/06)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	In and title if applicable.  ID DIRECTORS  DELET  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12.N 1.3.S 1.4.C E 2.1 T 22.N 2.3.S 2.4.C E 3.1 T 32.N 33.S 34.C E 4.1 T 4.2 P 4.3 S 4.4 C E 5.1 T 52.N	d Agent ITTLE IAME STREET ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP			☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	(44,00)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	In and title if applicable.  ID DIRECTORS  DELET  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S 2.4 C E 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C E 5.1 T 5.2 N 5.3 S	d Agent ITTLE IAME STREET ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME ITTLE IAME	TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS			☐ Change ☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	(901777)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	In and title if applicable.  ID DIRECTORS  DELET  DELET  DELET	NOTE: Registerer  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S 2.4 C E 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C E 5.1 T 5.2 N 5.3 S 5.4 C	d Agent ITLE IAME STREET ITLE IAME IAME IAME IAME IAME IAME IAME IAM	TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS			☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition	(44,00)
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN P ANGEL, JIMMY W 1933 HARTFORD CT WEST PALM BEACH FL 33409	DELET	NOTE: Registere  13. E 1.1 T 12 N 1.3 S 1.4 C E 2.1 T 22 N 2.3 S 2.4 C E 3.1 T 3.2 N 3.3 S 3.4 . C 4.1 T 4.2 N 4.3 S 4.4 C E 5.1 T 5.2 N 5.3 S 5.4 C E 6.1 T	d Agent ITTLE IAME STREET ITTLE IAME IAME IAME IAME IAME IAME IAME IAM	TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS			☐ Change ☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition	(41/08)

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.