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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

1998

DIVISION OF CORPORATIONS

FILED May 04 1998 8:00am Secretary of State

DOCU	MENT # P9700	0092469 (0)		
	TO VIDEO PRODUCTIONS,		,		ELIFE (1811 ELENF ELIKA 1811 1821
Principal Plac	co of Business	Mailing Address			8/10 HEN 3/8/0 01/10 /6/1 100
Principal Place of Business 4846 N UNIVERSITY DR. BOX 315		4846 N UNIVERSITY OR. BOX 315			
LAUDERHILL FL 33351		LAUDERHILL FL 33351	1. BUX 313		
				DO NOT WRITE IN THI	S SPACE
				 Date Incorporated or Qualified 10/27/1997 	
·	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21	#	26		65-0791924	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		5	Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	Added to Fees
24	26	29	30	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Curre		1001	10. Name and Address of New Registere	
CC	OSTA, BLANCHE M		81 Name	100	
4846 N UNIVERSITY DR, BOX 315			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
LAUDERHILL FL 33351			Oli But Addi	ress (1.0. box relittiber is rect Acceptable)	
			83		
			84 City		■ 85 Zip Code
			"	F	
11. Pursuant office or agent. La	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida Statu of Florida. Such change was jations of, Section 607.0505, F	ules, the above-named corp s authorized by the corpora Florida Statutes.	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered
SIGNATURE					
45	Signature typed or printed name of registered ap-	· · · · · · · · · · · · · · · · · · ·	OTE Registered Agent signature requi		
12.	OWNER	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME					CHANGE L. AUGILION
STREET ADDRESS	BLANCHE M. COSTA # 315		1.2 NAME		
CITY-ST-ZIP			1.3 STREET ADDRESS		
TITLE	DAGGERATES, FE	3335 DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME			2.2 NAME		C Change C Noomon
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		<u>. </u>	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-Z#P			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY.ST. 7IP			6.4 CITY, ST. 7ID		į

14. Thereby 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 supplementa' 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.