

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

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90261 027 ***150.00

DOCUMENT # P98000008277

1. Corporation Name
DREAMVISION PRODUCTIONS, INC.



Principal Place of Business
2501 SOUTH OCEAN DR.
SUITE 1510
HOLLYWOOD FL 33019

Mailing Address
2501 SOUTH OCEAN DR.
SUITE 1510
HOLLYWOOD FL 33019

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/27/1998

2. Principal Place of Business

21 3580 N 31ST AVENUE
Suite, Apt. #, etc.

22 City & State
23 HOLLYWOOD, FL

24 33021 Country

2a. Mailing Address

26 3580 N 31ST AVENUE
Suite, Apt. #, etc.

27 City & State
28 HOLLYWOOD, FL

29 33021 Country

4. FEI Number

22-3587490

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

COTLER, MARILYN J
2501 SOUTH OCEAN DR.
SUITE 1510
HOLLYWOOD FL 33019

10. Name and Address of New Registered Agent

81 Name

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

3580 N 31 Ave

83

84 City

Hollywood

FL

85 Zip Code
33021

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 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

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME COTLER, MARILYN J
STREET ADDRESS 2501 SOUTH OCEAN DR., SUITE 1510
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS 3580 N 31 Ave.
1.4 CITY-ST-ZIP Hollywood, FL 33021

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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.

SIGNATURE:

Marilyn J. Cotler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/29/99

954.925-4000

Date

Daytime Phone #

CR2E034 (11/98)

0136780