PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DO	CUMENT # P98000	014241				
1. 00	TRA PRODUCTIONS, INC.			1 (00 (10 N) (20 (5) 0) (8) (1 80 N) (80 N) (80 N)	(81 () 814 (112:8) (8)(4	
Princip	pal Place of Business	Mailing Address			I MET HI MENTER HI MET HI I	IIDRI 1914 1014
	NV 14 ST	1575 NW 14 ST				
i mami	FL 33125	MIAMI FL 33125		DO NOT WRITE IN TH	IS SPACE	
l				3. Date Incorporated or Qualifed		
1				02/12/1998	- M.	
<u></u>		2a. Mailing Address		4. FEI Number	<u> </u>	Applicable
		Suite, Apt. #, etc.			\$8.75 A	
22 27		—		5. Certifcate of Status Desired	Fee Re	
City & State City & State				6 Election Campaign Financing	\$5.00	
23			-	Trust Fund Contribution Added to Fees		
Zip		<u> —</u>	Country	8. This corporation owes the current year		SINO
24	9. Name and Address of Current	29 30	- -	Personal Property Tax. 10. Name and Address of New Registers		
	3. Halle and Address of Content	Trogressive regers	81 Name			
	FAIBISCH, RUSSELL C		82 Street Addr	ass (P.O. Box Number is Not Acceptable)	···	
1575 NW 14 ST				,,,,,,,, .		
1	MIAMI FL 33125		83	•		
			84 City		85 Zip C	ode
<u></u>	(0.10.007.007.007	J DOZ 4500 Flaido Ciabdaa ib	a show pared com	oration submits this statement for the auroosa	of changing its	registered
11. Pt	ursuant to the provisions of Sections 607.0502 ffice or registered agent, or both, in the State of gent. I am familiar with, and accept the obligation	f Florida. Such change was author	ized by the corporation	on's board of directors. I hereby accept the app	cointment as reg	istered
1		one of, Section 607.0505, Florida S	siames.			1
SIGNA	ATURE Signature, typed or printed name of registered agent.		tered Agent signature required			
12.	OFFICERS AND	==	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	Addition
TITLE	1222	V - 1 - CC1	I.1 TITLE			
NAME	Russeuc		3 STREET ADDRESS			1
•	111.0		L4 CITY-ST-ZIP			[
TITLE	7000000		L1 TITLE		Change	Addition
NAME		2	2.2 NAME			
STREET	ADORESS	2	3 STREET ADDRESS			
CITY-ST	-ZP		4 CITY-ST-ZIP		☐ Change	Addition
TITLE			LI TILE	·	C coming	
NAME			32 NAME 13 STREET ADDRESS	•		-
CITY-ST-	ADDRESS		A CITY-ST-ZIP			<u></u>
TITLE	-0-		I.1 TITLE		☐ Change	☐ Addition
HAME		4	1,2 NAME			
STREET	ADDRESS '	[4	3 STREET ADDRESS			Į
CITY-ST-	i i		A CITY-ST-ZIP		Charact .	Addition
TITLE			I TITLE		☐ Change	
NAME	·1		3 STREET ADDRESS			
Į.	ADDRESS		A CITY-ST-ZIP			}
CITY ST						
\ mre		☐ DELETE 8	A TITLE		☐ Change	☐ Addition
NAME					☐ Change	☐ Addition

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; 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.

6.4 CITY-ST-ZIP

SIGNATURE:

(305) 324- 7333

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

04-23-1999 90206 007 ***150.00