

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

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

04-29-1999 90027 049 ***150.00

PROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000030980

1. Corporation Name
HIGH BEAM PRODUCTIONS, INC.

Principal Place of Business
**2041 S. MIAMI AVENUE
 MIAMI FL 33129**

Mailing Address
**2041 S. MIAMI AVENUE
 MIAMI FL 33129**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/03/1998

4. FEI Number

65-0839561

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Election Campaign Financing
 Trust Fund Contribution ☐

\$5.00 May Be
 Added to Fees

8. This corporation owes the current year
 Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 6831 Abbott Av.

Suite, Apt. #, etc.

22 Apt #2

City & State

23 Miami Beach, FL

Zip

24 33141

Country

25 U.S.A.

2a. Mailing Address

26 6831 Abbott Av.

Suite, Apt. #, etc.

27 Apt #2

City & State

28 Miami Beach, FL

Zip

29 33141

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

**AFROM, ORLANDO
 2041 S. MIAMI AVENUE
 MIAMI FL 33129**

10. Name and Address of New Registered Agent

81 Name Marquez, Pedro R.

**82 Street Address (P.O. Box Number is No. Acceptable)
 611 South Mashta Dr.**

83

84 City Key Biscayne

FL

85 Zip Code 33149

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

Pedro R. Marquez

(NOTE: Registered Agent signature required when reinstating)

02/15/99

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
 NAME **OBREGON, GUSTAVO A**
 STREET ADDRESS **2041 S. MIAMI AVENUE**
 CITY-ST-ZIP **MIAMI FL 33129**

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ DELETE
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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 **Director** ☐ Change ☒ Addition
 1.2 NAME **Perez-Galan, Paul**
 1.3 STREET ADDRESS **6831 Abbott Av. Apt 2**
 1.4 CITY-ST-ZIP **Miami Beach, FL 33141**

2.1 TITLE **Officer** ☐ Change ☒ Addition
 2.2 NAME **Marquez, Pedro R.**
 2.3 STREET ADDRESS **611 South Mashta Dr.**
 2.4 CITY-ST-ZIP **Key Biscayne, FL 33149**

3.1 TITLE **Officer** ☐ Change ☒ Addition
 3.2 NAME **Iglesias, Andrie A.**
 3.3 STREET ADDRESS **5850 Alton Rd.**
 3.4 CITY-ST-ZIP **Miami Beach, FL 33140**

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:

Pedro R. Marquez
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/15/99

DATE

(305) 867-6780

DAYTIME PHONE #

CR2E034 (11/98)

0184187