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PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Feb 27, 1999 8:00 am
Secretary of State

02-27-1999 90075 039 ***150.00

DOCUMENT # P98000045033

1. Corporation Name

NEWLINK PRODUCTION, INC.

Principal Place of Business

~~2020 CORAL WAY~~
~~SUITE 410~~
~~MIAMI FL 33146~~

Mailing Address

~~2020 CORAL WAY~~
~~SUITE 410~~
~~MIAMI FL 33146~~

2. Principal Place of Business

21 634 W 47 ST

Suite, Apt. #, etc.

22

City & State

23 MIAMI BEACH - FL

Zip

24 33140

Country

25 MIAMI DADE

2a. Mailing Address

26 634 W 47 ST

Suite, Apt. #, etc.

27

City & State

28 MIAMI BEACH - FL

Zip

29 33140

Country

30 MIAMI DADE

9. Name and Address of Current Registered Agent

ROITBERG, SERGIO

~~2020 CORAL WAY~~
~~SUITE 410~~
~~MIAMI FL 33146~~

81 Name

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

83 634 W 47 ST.

84

City MIAMI BEACH -

FL

85 Zip Code

33140

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

1/21/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME ROITBERG, SERGIO

STREET ADDRESS ~~2020 CORAL WAY, SUITE 410~~

CITY-ST-ZIP ~~MIAMI FL 33146~~

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 634 W 47 ST.

1.4 CITY-ST-ZIP MIAMI BEACH - FL 33140

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/21/99

0217545

CR2E034 (11/98)