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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** FILED

00 MAY -2 AM 10: 56



SECRETARY OF STATE FALLAHASSEE, FLORIDA



| DOCUMENT # 1. Corporation Name | P98000050223 | |
|--------------------------------|--------------|--|
| NEIL AT NIGHT, INC. | | |

Principal Place of Business 605 LINCOLN RD MIAMI BEACH FL 33139

Mailing Address

1 HSN DRIVE

ST PETERSBURG FL 33729.

| | | | BO NOT WITH THE STACE | | |
|--|--|------------------|---|-----------------------------------|--|
| · · · · · · · · · · · · · · · · · · · | | - | 3. Date Incorporated or Qualifed 05/29/1998 | | |
| . Principal Place of Business | 2a. Mailing Address | • • • | 4. FEI Number | Applied For | |
| | 26 1230 6th Ave | _ | 65-0838318 | Not Applicable | |
| Suite, Apt. #, etc. | Suite, Apt. # etc. | | 5. Certifcate of Status Desired | \$8.75 Additional Fee Required | |
| City & State | City & State 28 New York, NY | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip Country 25 | Zip Con 29 \OC ZO 30 | USA | This corporation owes the current year Personal Property Tax. | Intangible No | |
| Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | |
| CT CORPORATION SYSTEM | · · · · | 81 Name | | | |
| 1200 SOUTH PINE ISLAND RD | | 82 Street Addre | ess (P.O. Box Number is Not Acceptable) | | |
| PLANTATION FL 33324 | , | 83 | - anninggagi i | 719 | |
| | | 83 | -06/14/0001 | 011006 | |
| · · · | : | 84 City | ****150.00 F | | |
| Pursuant to the provisions of Sections 607.050 | 02 and 607,1508, Florida Statutes, the | bove-named corpo | pration 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 | : | a Clatoles. | | | | | | | |
|---|------------------------|------------------------------|---|--|--|--|--|--|--|
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | |
| 12. | OFFICERS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | | |
| TITLE | ☐ DELETE | 1.1 TITLÉ | V D □ Change □ Addition | | | | | | |
| NAME | | 1.2 NAME | Conclus och Tulius | | | | | | |
| STREET ADDRESS | | 1.3 STREET ADDRESS | Genachauski, Julius 1230 6th Ave 15th FL | | | | | | |
| CITY-ST-ZIP . | | 1.4 CITY-ST-ZIP | NEW YORK, NY 10:02 9 | | | | | | |
| TITLE | ☐ DELETS | 2.1 TITLE | ☐ Change ☐ Addition | | | | | | |
| NAME | | 2.2 NAME | Pin Vi a Pack | | | | | | |
| STREET ADDRESS | | 2.3 STREET ADDRESS | Feldman Kick Blvd | | | | | | |
| CITY-ST-ZIP | | 2. 4 CITY+ST-ZIP | Los Aneles CA gooteg | | | | | | |
| TITLE | DELETE | 3.1 TITLE | Change Maddition | | | | | | |
| NAME . | | 3.2 NAME | Charles. | | | | | | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | Sommer Later Ave 15th FC | | | | | | |
| CITY-ST-ZIP | | 3.4. CITY-ST-ZIP | 1230 Vark NY 10020 | | | | | | |
| TITLE . | DELETE | 4.1 TITLE / | Change [VAddition | | | | | | |
| .NAME. ج ب | | 4.2 NAME ~ ~ = | | | | | | | |
| STREET ADDRESS | | | Rosenberg, Helen- 8800 West Sunset Blvd. | | | | | | |
| CITY-ST-ZIP | | 4.3 STREET ADDRESS | 2000 WEST SURJET 1314-11 | | | | | | |
| TO E | DELETE | 4.4 CITY-ST-ZIP 5.1 TITLE | West Hollywood CA 90069 | | | | | | |
| 104ME | | 5.2 NAME | I FIS | | | | | | |
| · · | | | H. Steven Holtzman | | | | | | |
| reffebêt kidemile. | ? | 5 3 STREET ADORESS | St. Petersburg FL 33729 | | | | | | |
| | Operate | 5 + CITY-ST-ZIP 6 : TITLE | | | | | | | |
| MAME | | | A T Change Chaddition | | | | | | |
| | | RENAME | KenMorgan | | | | | | |
| ET ADDRESS | | 61: STREET ADDRESS | St Deleash to PL 33729 | | | | | | |
| 1177 ST. 78P | | A # CITY, ST, 75P | SI Delection to Pl. 27 1/5 | | | | | | |

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 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 13 if rhapped to the corporation of the officer or director of the corporati Block 12 or Block 13 if changed

SIGNATURE: