**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P98000050640

SOUTHERN SUN PRODUCTIONS, INC.

						JULI BELEH BULL BELEG	BINI BIBN WON TOOL
Principal Place	of Business	Mailing Address					
1165 - 101ST S	STREET	1165 - 101ST STREET					
#1 #1 BAY HARBOR FL 33154 BAY HARBOR FL 33154					DO NOT WRITE IN THIS SPACE		
	•				3. Date Incorporated or Qualifed		
					06/04/1998		
2. Principal Pl	lace of Business	2a. Mailing Address		_	4. FEI Number	` ` _	Applied For
21 1165	1015T	26 P.O. BOX 54	' <del>\</del>	ન	65-0841175		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1	5 Additional Required
City & State	9-11 011	City & State			6. Election Campaign Financing	\$5.0	00 May Be
	BAY HARbor ASLANDS 28 Surfside				Trust Fund Contribution		ed to Fees
Zip	Country		ountry		8. This corporation owes the current	year Intangible	
<u> マ</u> ろ15	JY [25]	29 33154 50			Personal Property Tax.	☐ Yes	No
	9. Name and Address of Current				10. Name and Address of New Reg	istered Agent	
	· · · · · · · · · · · · · · · · · · ·		81 Nar	ne	/^		
MAS	SSEY, ERIC				// ft	<u> </u>	<del>-</del>
1165	5 - 101ST STREET		82 Stre	et Addres	ss (P.O. Box Number is Not Acceptable	,	
#1	`		83				
BAY	HARBOR FL 33154						
			84 City			FL	Zip Code
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida Such change was authorized	red by the co	ed corpor orporation	ration submits this statement for the pur is board of directors. I hereby accept the	pose of changing e appointment as	its registered s registered
	•						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Registe	red Agent signat	ure required i		DATE	
12.	OFFICERS AND	DIRECTORS 1	3.		ADDITIONS/CHANGES TO OFFIC		
TITLE	DP	☐ DELETE 1.	TITLE	DT	ı	<b>∑</b> Chan	nge
NAME	MASSEY, ERIC	1.2	2 NAME	Sw	āin, Lee		
STREET ADDRESS	1165 - 101ST STREET #1	1.3	STREET ADDRE		53 Oak St.		
CITY-ST-ZIP	BAY HARBOR FL 33154	1/	CITY-ST-ZIP		rasota, FL 34236		
TITLE	DΤ		1 TITLE	<del></del>	Lasuva, LB SALSO	☐ Chan	nge
NAME	BASHOFF, JASON	22	2 NAME				
STREET ADDRESS	1165:-:101ST-STREET #3		3 STREET ADDRE	-ss	ران دان دان دان دان دان دان دان دان دان د	· '	
	BAY HARBOR FL 33154		4 CITY-ST-ZIP			•	Ţ
CITY-ST-ZIP	DAT TIANDONTE COTOT		1 TITLE			☐ Chan	nge Addition
TITLE		<del>-</del>	2 NAME			_	_
NAME		<b>1</b>					
STREET ADDRESS			3 STREET ADDRI	555	1	-	
CITY-ST-ZIP			4. CITY-ST-ZIP	+-		Chan	nge Addition
TITLE		<del>-</del>	1 TITLE	-		L_ Onto	igo
NAME		4.	2 NAME				
STREET ADDRESS		43	3 STREET ADDRE	ESS			Ì
CITY-ST-ZIP	•		4 CITY-ST-ZIP		adultion of the state of the st		
TITLE		<del>-</del>	1 TITLE		•	☐ Char	nge 🗀 Addition
NAME	· · ·		2 NAME				
STREET ADDRESS		5.	3 STREET ADDRI	ESS			
CITY-ST-ZIP			4 CITY-ST-ZIP				
TITLE		DELETE 6.	1 TITLE			☐ Char	nge 🗌 Addition
NAME		6.	2 NAME				
CTDEET ADDRESS		6.	3 STREET ADDRI	ESS			

SIGNATURE:

14. I hereby certify that the information indicated on this annual report or s officer or director of the constration Block 12 or Block 13 if changed, or

CITY-ST-ZIP

et with this ling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information rental aroutel report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an receiver ar trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment with an address, with all other like empowered.

Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90081 039 \*\*\*150.00

Daytime Phone #