

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90148 043 ***150.00

DOCUMENT # P98000053477

1. Corporation Name

SOUTH BEACH PRODUCTION CENTER, INC.

Principal Place of Business

1555 PENNSYLVANIA AVE STE 210
MIAMI BEACH FL 33139

Mailing Address

1555 PENNSYLVANIA AVE STE 210
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/15/1998

4. FEI Number

65-0844930

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be

Trust Fund Contribution

Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

Yes

No

2. Principal Place of Business

21 1200 Collins Ave.

2a. Mailing Address

26 1200 Collins Ave.

Suite, Apt. #, etc.

22 Suite #100.

Suite, Apt. #, etc.

27 Suite #100.

City & State

23 Miami Beach, FL.

City & State

28 Miami Beach, FL.

Zip

24 33139

Country

Zip

29 33139

Country

30

9. Name and Address of Current Registered Agent

RIVERO, HERIBERTO JR
1555 PENNSYLVANIA AVE STE 210
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name RIVERO, Heriberto Jr.
82 Street Address (P.O. Box Number is Not Acceptable) 1200 COLLINS AVE STE #100.
83
84 City MIAMI BEACH FL 85 Zip Code 33139

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

4/2/99.

12. OFFICERS AND DIRECTORS

TITLE D
NAME RIVERO, HERIBERTO JR
STREET ADDRESS 1555 PENNSYLVANIA AVE STE 210
CITY-ST-ZIP MIAMI BEACH FL 33139

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

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CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS 1200 COLLINS AVE STE #100.

1.4 CITY-ST-ZIP MIAMI BEACH, FLORIDA 33139.

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 line empowered.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

4/2/99

(305) 538-1800

CR2E034 (11/98)