

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
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90090 021 ***150.00

DOCUMENT # P98000076047

1. Corporation Name
DRAMATIC DESIGN GROUP, INC.

Principal Place of Business
10468 NORTHWEST 58TH PLACE
PARKLAND FL 33076

Mailing Address
10468 NORTHWEST 58TH PLACE
PARKLAND FL 33076

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/01/1998

4. FEI Number

65-0899576

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 Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 10468 NORTHWEST 58TH PL.

Suite, Apt. #, etc.

22

City & State

23 PARKLAND, FL.

Zip

24 33076

Country

25 U.S.A.

2a. Mailing Address

26 10468 NORTHWEST 58TH PL.

Suite, Apt. #, etc.

27

City & State

28 PARKLAND, FL.

Zip

29 33076

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

AMERILAWYER
349 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

SANDRA A. EPSTEIN

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

10468 NORTHWEST 58TH PLACE

83

84 City

PARKLAND

FL

85 Zip Code

33076

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

3/9/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME EPSTEIN, SANDRA A
STREET ADDRESS 10468 NORTHWEST 58TH PLACE
CITY-ST-ZIP PARKLAND FL 33076

TITLE ☐ DELETE

NAME EPSTEIN, BENJAMIN J
STREET ADDRESS 10468 NORTHWEST 58TH PLACE
CITY-ST-ZIP PARKLAND FL 33076

TITLE ☐ DELETE

NAME MAHFUZ, RITA
STREET ADDRESS 10468 NORTHWEST 58TH PLACE
CITY-ST-ZIP PARKLAND FL 33076

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 ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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

3/9/99

Date

954-340-5220

Daytime Phone #

CR2E034 (11/98)

0170561