**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000084778

CD IOV MARKETING ENTERPRISES INC.

	ANIMETHAC ENTERN MOTO											
Principal Place	e of Business	Mailing Address					+ (EB)198: 119 II	kill sänt ållti ef	*** ***** ****	·· ·Bite missi ·BB		
5333 COLLINS AVENUE 5333 COLLINS AVENUE										. <b>.</b>		
SUITE 809 SUITE 809  MIAMI BEACH FL 33140 MIAMI BEACH FL 33140							DO NOT WRITE IN THIS SPACE					_
}	i C 601 io					Γ	3. Date incorporate	d or Qualifed			مسرجه	}
}		_					10/02/1998_	CS	-08	7006	75	4
2. Principal P	tace of Business	2a. Mailing Address					4. FEI Number		<b>ノ</b>	<del></del>	pplied For	4
21		26					23	S CO	<del></del>		ot Applicable	-
Suite, Apt.	#, etc.	Suite, Apt. #, etc	i.			)	5. Certificate of Stat	us Desired			Additional lequired	
22			27				C Frank Compale	- Financias	<del></del>		May Be	┪
City & Stat	A	F '	City & State			1	<ol><li>Election Campake Trust Fund Conti</li></ol>	_		<b>7</b> - · ·	to Fees	1
23	Country	Zip	Cc	ountry.			8. This corporation		ent vear Ir	<del></del>		1
] Zip 	25	29	30	, c , <sub>-</sub>		-  -	Personal Propert		0/12 y 00-1	Yes	□No	
24	9. Name and Address of Curre			T		1	10. Name and Addr		Registered	d Agent		]
<u> </u>	140110 0112 / 1011 010 01			81	Name		-					1
KA2	anjian, Edwaro			82	Street	Address	(P.O. Box Number i	s Not Accept	able)			1
5333 COLLINS AVENUE				_	30000	7,00,000	(1.0.20.1.0					4
	E 809			83								ì
MIA	MI BEACH FL 33140			84	City				FI	85 Zip	Code	1
l .				1 1	ı							1
11. Pursuant	to the provisions of Sections 607.056	02 and 607.1508, Florida S	Statutes, the	above	e-named	corporal	tion submits this stat	ement for the	purpose (	of changing i	uereskigen zi	7
11. Pursuant office or ragent. 1 a	to the provisions of Sections 607.056 egistered agent, or both, in the State in familiar with, and accept the obligi							tement for the hereby acce	purpose of the appoint	of changing in ointment as t	egistered	<u>6</u>
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable.	Statules, the was authorize 5, Florida Sta (NOTE: Register 13	ed Agen					DATE		ORS IN 12	(98)
1	Signature, typed or printed name of registered agu OFFICERS AI		(NOTE: Register	ed Agen			en reinstating)		DATE		ORS IN 12	(11/98)
SIGNATURE 12. TITLE	Signature, typed or printed name of registered age OFFICERS AI	ant and title if applicable.  ND DIRECTORS	(NOTE: Register 13 TE 1,1	ed Agen			en reinstating)		DATE	ND DIRECT	ORS IN 12	134 (11/98)
SIGNATURE	Signature, typed or printed name of registered agu OFFICERS AI	ant and title if applicable.  ND DIRECTORS	(NOTE: Register 13 TE 1,1 12	ed Agen ITTLE NAME		required who	en reinstating)		DATE	ND DIRECT	ORS IN 12	ZE034 (11/98)
SIGNATURE 12. TITLE NAME	Signature, typied or printed name of registered age OFFICERS AI PD KAZANJIAN, EDWARD	ent and table if appacebbe.  ND DIRECTORS  DELET	(NOTE: Register 13 TE 1.1 1.2 1.3 1.4	ed Agen ITTLE NAME	it aignature	required who	en reinstating)		DATE	ND DIRECT	ORS IN 12	CR2E034 (11/98)
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	OFFICERS AI  PD  KAZANJIAN, EDWARD  5333 COLLINS AVENUE  MIAMI BEACH FL 33140  SD	ant and title if applicable.  ND DIRECTORS	(NOTE: Register 13 TE 1.1 1.2 1.3 1.4	ed Agen I. TITLE NAME STREET	it aignature	required who	en reinstating)		DATE	ND DIRECT	ORS IN 12	R2E034 (
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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 Statutas. I further certify that the information indicated on this annual report or suppliemental 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 in an attackment with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

**FILED** Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90137 030 \*\*\*150.00