PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secre ary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000088511

O. P. ENTERTAINMENT, INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90213 049 ***150.00



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Principal Flace	e of Business	Mailing Address							. ,
642 S. ATLANTIC AVENUE 642 S. ATLANTIC AVENUE									
ORMOND BEAC	CH FL 32176	ORMOND BEACH FL 32	DRMOND BEACH FL 32176			DO NOT WRITE IN THIS SPACE			
						3. Date incorporated or Qualifed			
						10/15/1998			
2. Principal Pi	face of Business	2a. Mailing Address				4. FEI Number		11	Applied For
21		26				59-35437 2 4			No Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	7	, -	Additional
22		27				3. Contrate of Charles Desired	- 	Fee I	Required
City & State	e	City & State				6. Election Campaign Financing	7		0 l√lay Be
23		28				Trust Fund Contribution			d to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes the current	•	ngible □ Yes	<u> 340</u> 6
24	25	29			 -	Personal Property Tax. 10. Name and Address of New Reg			
	9. Name and Address of Curr	em Registered Agent		81	Name	10. Name and Address of New Neg	istert u A	gent	
RINT	RONA, DOMINIC								
	S. ATLANTIC AVENUE		82 Street Ad			ess (P.O. Bo) Number is Not Acceptable)		
ORM	IOND BEACH FL 32176		}	83					
			ļ	84	City			85 Zi	o Code
					•		_ <u>FL</u>		_
office c r r	registered agent, or both, in the Stat	ie of Florida. Such change was	: Juthorized	by th	-named c∈rpc he corporatio	oration submits this statement for the put n's board of directors. I hereby accept the	pose of c le aptioint	hanging Iment as	its registered registered
agent. I a	m familiar with, and a cept the oblig	gations of, Section 607.0505, I	lorida Statu	ites.		,			1
SIGNATURE	Signature, typed or printed na ne of registered as	Pintuna	T = Populared	Agent	signature regi ired	when rainstaling	<u> 4-1</u>	9-9	9
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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 each; 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:

SIGNATULE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-99

107-774-872C