
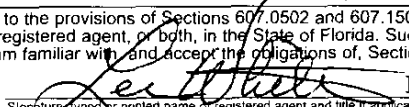


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90119 039 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000096676			
1. Corporation Name CINESTAR PRODUCTIONS, INC.			
Principal Place of Business 2120 West Colonial Drive Orlando, Florida 3280		Mailing Address 4130 Players Circle Orlando Fl. 32808	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	
21 2120 West Colonial Dr.	26 4130 Players Circle	November 13, 1998	
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number	Applied For
		59-3551840	Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Orlando, Florida	28 Orlando, Florida	<input checked="" type="checkbox"/> X	\$5.00 May Be Added to Fees
24 Zip	29 Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>
24 32804	29 32808	7. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
25 Country	30 Country		
25 Orange	30 Orange		
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Albert C. Gannaway, Jr. 2500 Silver Star Road, Bldg A Orlando, FL 32804		81 Name LES WHITE	
		82 Street Address (P.O. Box Number is Not Acceptable) 4130 Players Circle	
		83	
		84 City Orlando, Florida FL	
		85 Zip Code 32808	
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		President/Sole Director	
		February 1, 1999	
Signature typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ALBERT C. GANNAWAY, JR. <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	President/ S/D
STREET ADDRESS		1.3 STREET ADDRESS	LES WHITE
CITY-ST-ZIP		1.4 CITY-ST-ZIP	32808
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	4130 Players Circle, Orlando FL
NAME		2.2 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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:

 S/D

February 1 1999

Date Daytime Phone #

CR2E034 (11/98)