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

- PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

FILED May 04, 1999 8:00 am Secretary of State **Katherine Harris** Secretary of State

05-04-1999 90117 048 ***150.00

r. Corporation	MENT # P98000 ODUCTIONS, INC.	096700					
MALLIN							
Barrier Bloo		Mariling Address					
Principal Place		Mailing Address			·		
2100 HOLLYWOOD BLVD. 2100 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020							
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	3				DO NOT WRITE IN TH	IIS SPACE	
	,				3, Date Incorporated or Qualifed		ł
		2a. Mailing Address			11/17/1998	Apr	olied For
	face of Business	2a. Mailing Address		C.65-0875600		Applicable	
21 Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.75 A	
22		27	·		5. Certifcate of Status Desired	Fee Rec	quired
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 6	May Be	
23	· · · · · · · · · · · · · · · · · · ·	28		Trust Fund Contribution	Added to	Fees	
Zip				iry	8. This corporation owes the current year		No.
24	25 9. Name and Address of Current		30		Personal Property Tax. 10. Name and Address of New Registers		TNO .
	9. Name and Address of Current	Kegistered Agent	1	Name	10. Name and Address of New Registers	ra Agont	
RIVE	RA, NICHOLAS A		· L				
2100 HOLLYWOOD BLVD.			8	Street Addr	ess (P.O. Box Number is Not Acceptable)		
HOL	LYWOOD FL 33020		8	33			
	. ()		-	34 City		85 Zip C	ode
	1/~		- 1	1	F	LII	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	s, the abo	ve-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its r	registered listered
agent. I a	m familian with, and accept the obligat	ions of, Section 607.0505, Florid	da Statut	es.	1	10-10-	
SIGNATURE SIGNATURE			AGO	ENI		1120199	<u> </u>
12.	Signal to spill or brinked after 61 reactive of agent and title if applicable. (NOTE OFFICERS AND DIRECTORS		Registered Agent signature requirer 13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	PVTD DELETE		1.1 TITLE			Change	Addition
NAME	RIVERA, NICHOLAS A	DLAS A		E			}
STREET ADDRESS	2100 HOLLYWOOD BLVD.			EET ADDRESS			
CITY-ST-ZIP			1.4 CITY	-ST-ZIP			
TITLE	. ,	☐ DELETE 2.1		■	-	Change	☐ Addition
NAME	. 23		2.2 NAM	Į			}
STREET ADDRESS			1	EET ADDRESS		•	
CITY-ST-ZIP	□ DELETE		2.4 CITY-ST-ZIP		···	☐ Change	Addition
TITLE NAME	, DELETE		3.7 IIIL	ì		٠	
				EET ADDRESS			}
STREET ADDRESS CITY-ST-ZIP				r-ST-ZIP			
TITLÉ		☐ DELETE		E		☐ Change	Addition
NAME			4. 2 NAM	AE			,
STREET ADORESS			4.3 STR	EET ADDRESS		,	ļ
CITY-ST-ZIP			4.4 CITY	-ST-ZIP		<u>``</u>	
TITLE		☐ DELETE	5.1 TITL			☐ Change	☐ Addition
NAME	,		5.2 NAM	1.		; ;	
STREET ADDRESS	• • •			EET ADDRESS			
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	'-ST-ZIP E		Change	Addition
TITLE NAME	•		6.2 NAM	- 1	•	··	
STREET ADDRESS	n			EET ADDRESS			
STREET ADDRESS				- ST- 7IP			

14. I hereby certify that the information indicated on this annual report of 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 odprovation 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:

Daytime Phone #