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

DOCUMENT # P98000099062 SILENT PRODUCTIONS, INC.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90085 035 ***150.00



Principal Place of Business Mailing Address								
C/O 210 N. WYMORE ROAD WINTER PARK FL 32789		C/O 210 N. WYMORE ROAD WINTER PARK FL 32789			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 11/24/1998			
Principal Place of Business The Principal Place of Business		2a. Mailing Address			4. FEI Number 59-3543179		plied For t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			E Contifered of Status Decired	\$8.75 Additional — Fee Required		
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution			
Zip Country		Zip Country		ı	8. This corporation owes the current year Intan			
24	25	29 30	J.,		7 Crocker Freezis	Yes	□No	
	9. Name and Address of Current	Registered Agent		1	10. Name and Address of New Registered Ag	jent		
OSSINSKY, MARC P			81	Name				
	N. WYMORE ROAD			Street A	t Address (P.O. Box Number is Not Acceptable)			
WINT	ER PARK FL 32789		83		De july			
			84	City	FI)	85 Zip (Code Ballat	
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)								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE			Change	☐ Addition	
NAME	ROTHAN, RUSSELL R		1.2 NAME					
STREET ADDRESS	C/O 210 N. WYMORE ROAD		1.3 STREE	T ADDRESS				
CITY-ST-ZIP				T-ZIP		Change	☐ Addition	
TITLE	DELETE 2.1				·	Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP				ST-ZIP		Change	Addition	
TITLE		- OCCUPA	3.1 TITLE 3.2 NAME		•			
NAME STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			3.4. CITY-1	1				
TITLE		☐ DELETE	4.1 TITLE			Change	Addition	
NAME			4. 2 NAME				•	
STREET ADDRESS			4.3 STREE	TADORESS				
CITY-ST-ZIP			4.4 CITY- S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition	
NAME			5.2 NAME	ĺ				
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			□ A 3 3 6	
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	T ADDRESS				

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:

RUSSEIL ROTHAN

Davtime Phone #