

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

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90125 005 ***150.00

DOCUMENT # P98000108126

1. Corporation Name

FLYINGTRAIN PRODUCTIONS, INC.

Principal Place of Business

21030 WOODSPRING AVE
BOCA RATON FL 33428

Mailing Address

21030 WOODSPRING AVE
BOCA RATON FL 33428

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/30/1998

4. FEI Number

65-0886416

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

Country

29 Zip

Country

9. Name and Address of Current Registered Agent

SLATKIN, SHELDON T
9900 WEST SAMPLE ROAD
SUITE 400
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

DENNIS DONOHUE

82 Street Address (P.O. Box Number is Not Acceptable)

21030 WOODSPRING AVE

83

84 City

BOCA RATON

FL

85 Zip Code

33428

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]

(NOTE: Registered Agent signature required when reinstating)

2/10/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DONOHUE, DENNIS
STREET ADDRESS 21030 WOODSPRING AVE
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☐ DELETE

NAME MURR, JOHN P
STREET ADDRESS 21030 WOODSPRING AVE
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☐ DELETE

NAME MACADAM, DEAN
STREET ADDRESS 21030 WOODSPRING AVE
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☐ DELETE

NAME BRUNS, GREG A
STREET ADDRESS 21030 WOODSPRING AVE
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☐ DELETE

NAME ALDER, JEFFREY G
STREET ADDRESS 21030 WOODSPRING AVE
CITY-ST-ZIP BOCA RATON FL 33428

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/99
Date

Daytime Phone #

CR2E034 (11/98)