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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S18472

(8)

Mailing Address

RANDI PHILLIPS PRODUCTIONS, INC.

FILED
Jan 20 1998 8:00am
Secretary of State



305-770-1435

435 NE 210TI STE. 202 MIAMI FL 33	H CIRCLE TERRACE	435 NE 210TH CIRCLE TER STE. 202 MIAMI FL 33179	RRACE	DO NOT WRITE 3. Date incorporated or Qualified 12/10/1990	IN THIS S	PACE]
2. Principal Pi	ace of Busingss	2a. Mailing Address	01	4. FEI Number		→	oplied For	
21 15 Q	7 Johnson St.		nson Street	65-0237040		 ! - -	ot Applicable	1
Suite, Apt.	#, etc.	Suito, Apt. #, etc.		5. Certificate of Status Desired			Additional equired	
City & State 23 66//	ywood 71	City & State 28 Nolly word	1,71	Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees	
Zip 7 24 3300	Country USA	29 33020 3	Country OUSA	8. This corporation owes or has per Personal Property Tax due June	30. L	Yes [langible No	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Re	gistered A	gent		
DAVIS, RONALD L.								
	YLÁKE STATE BANK BLDG., STE.	407	82 Street Addre	ess (P.O. Box Number is Not Acceptal	ole)			1
	50 NE MIAMI GARDENS DR.							
NO	ORTH MIAMI BEACH FL 33179		83					
			84 City			85 Zip	Code	1
					FL			
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 registernd agent	and little if applicable (NOTE F	Rogistored Agent signature require		ITACI			
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND			16
TITLE	DP	☐ DELETE	1.1 TITLE			Change	Addition	CR2E034 (10/97
NAME	PHILLIPS, RANDI		1.2 NAME					8
STREET ADDRESS	435 NE 210TH CIR. TERR.		1.3 STREET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33179		14 CITY-ST-7IP					J&
TITLE	T	DELETE	21 THTLE			☐ Change	Addition	10
NAME	PHILLIPS, BERNARD		2.2 NAME					1
STREET ADDRESS	2828 CONN AVE. NW #611		23 STREET ADDRESS					
CITY-ST-ZIP	WASHINGTON DC 20008		2 4 CITY-ST-ZIP					
TITLE		DELETE	3.1 TITLE			☐ Change	Addition]
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			3.4. CITY - ST - ZIP					
TITLE		DELETE	4.1 TITLE			Change	Addition	
NAME			4.2 NAME					
STREET ADDRESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 City-St-ZiP					
TITLE		DELETE	5.1 TITLE			Change	Addition	1
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET ADDRESS					
CITY-ST-ZIP			5.4 CITY-ST-ZIP					
TITLE		DELETE	6.1 TRLE			Change	Addition	1
NAME			6.2 NAME			•		
STREET ADDRESS			6.3 STREET ADDRESS					
			6.4 CITY-S1-ZIP					
City-St-ZIP 14. I hereby o	pertify that the information supplied with	this filing does not qualify for	the exemption stated in S	Section 119.07(3)(i), Florida Statules. I	further cer	tify that the	information	1
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 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.								