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

PROFIT CORPORATION ANNUAL REPORT.

1999

1. Corporation Name

DOCUMENT # **S25391**



Secretary of State DIVISION OF CORPORATIONS

Apr 22, 1999 8:00 am Secretary of State FLORIDA DEPARTMENT OF STATE Katherine Harris 04-22-1999 90137 034 ***150.00

BAZOUK	(A FILMS, INC.							
Principal Place	e of Business	Mailing Address				it simi minit me	OLS BIRST BIRTT OF	411 BIBII 1841
3081 NW 24TH	I ST.	3081 NW 24TH ST.				•	•	
MIAMI FL 33142 - MIAMI FL 33142					DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed				
	* • *				01/14/1991		, ·	
2 Dringing B	Place of Business	2a. Mailing Address			4. FEI Number		Apr	lied For
— ' '	iace of Dusiness,	26			65-0332232		<u> </u>	Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.					\$8.75 A	dditional
22		27			5. Certifcate of Status Desired		Fee Rec	uired
City & Stat	te / , · · ·	City & State			6. Election Campaign Financing		\$5.00 A	/lay Be
23	_	28			Trust Fund Contribution	<u>. </u>	-Added to	Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current	nt year Inta		\
24	25	29 3	0		Personal Property Tax.			□No
1 1	9. Name and Address of Curre	nt Registered Agent	8.	1 Nama	10. Name and Address of New Re	gistered /	Agent	
A DA	IADA. JOSE JR.		l°	1 Name	•	· <u> </u>		`
	1 NW 24TH ST.		8:	2 Street Addre	ess (P.O. Box Number is Not Acceptab	ole)		
MIAMI FL 33142		•	8:					————
WIL	MI 1 E 30142		0,	"				
ı		•	84	4 City		FL	85 Zip C	ode
					oration submits this statement for the p		hanaiaa ita I	ragistared
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable. (NOTE: Re	egistered Ag	ent signature required		DATE	D DIDECTOR	
12.		ND DIRECTORS .	13.		ADDITIONS/CHANGES TO OFF	ICERS AN	☐ Change	Addition
TITLE	DP 1005	☐ DELETE	1.1 TITLE				Citalide	
NAME	ARMADA, JR., JOSE		1.2 NAME		·			}
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	MIAMI FL	☐ DELETE	1.4 CITY-				Change	Addition
TITLE		C. DELETE	2.1 TITLE					
NAME .				- 1				1
STREET ADDRESS			2.2 NAME					
CITY-ST-ZIP			2.3 STRE	ET ADDRESS				
TITLE		C) OFFETE	2.3 STRE 2. 4 CITY	ET ADDRESS -ST-ZIP			Change	☐ Addition
			2.3 STRE 2.4 CITY 3.1 TITLE	ET ADDRESS -ST-ZIP			<u> </u>	☐ Addition
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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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP