

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

FILED
Mar 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S50804 (1)
1. Corporation Name
LIZART'S PRODUCTIONS, INC.

Principal Place of Business
325 SUNSET DRIVE "A"
FT. LAUDERDALE FL 33301

Mailing Address
325 SUNSET DRIVE "A"
FT. LAUDERDALE FL 33301



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>325 Sunset Drive "A"</u> City & State 22 <u>FT. LAUDERDALE FL</u> Zip 23 <u>33301</u>		2a. Mailing Address 26 <u>325 Sunset Drive "A"</u> City & State 27 <u>FT. LAUDERDALE FL</u> Zip 28 <u>33301</u>		3. Date incorporated or Qualified 05/08/1991	
2. Principal Place of Business 21 <u>325 Sunset Drive "A"</u> City & State 22 <u>FT. LAUDERDALE FL</u> Zip 23 <u>33301</u>		2a. Mailing Address 26 <u>325 Sunset Drive "A"</u> City & State 27 <u>FT. LAUDERDALE FL</u> Zip 28 <u>33301</u>		4. FEI Number 65-0275670	
2. Principal Place of Business 21 <u>325 Sunset Drive "A"</u> City & State 22 <u>FT. LAUDERDALE FL</u> Zip 23 <u>33301</u>		2a. Mailing Address 26 <u>325 Sunset Drive "A"</u> City & State 27 <u>FT. LAUDERDALE FL</u> Zip 28 <u>33301</u>		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
2. Principal Place of Business 21 <u>325 Sunset Drive "A"</u> City & State 22 <u>FT. LAUDERDALE FL</u> Zip 23 <u>33301</u>		2a. Mailing Address 26 <u>325 Sunset Drive "A"</u> City & State 27 <u>FT. LAUDERDALE FL</u> Zip 28 <u>33301</u>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
2. Principal Place of Business 21 <u>325 Sunset Drive "A"</u> City & State 22 <u>FT. LAUDERDALE FL</u> Zip 23 <u>33301</u>		2a. Mailing Address 26 <u>325 Sunset Drive "A"</u> City & State 27 <u>FT. LAUDERDALE FL</u> Zip 28 <u>33301</u>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent PATRICIA A. RATHBURN 217 N.E. 2ND STREET SUITE 2400 FT. LAUDERDALE FL 33301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code			

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 _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	VICE President
NAME	FREEMAN, ELIZABETH D.	1.2 NAME	FREEMAN, D. Elizabeth
STREET ADDRESS	325 SUNSET DRIVE "A"	1.3 STREET ADDRESS	325 SUNSET DRIVE "A"
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33301
TITLE	D	2.1 TITLE	President
NAME	FREEMAN, ARTHUR	2.2 NAME	FREEMAN, ARTHUR
STREET ADDRESS	325 SUNSET DRIVE "A"	2.3 STREET ADDRESS	325 SUNSET DRIVE "A"
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33301
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this form 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.

SIGNATURE: Arthur Freeman ARTHUR FREEMAN 2/14/98 954-523-8000
DATE: 2/14/98

CR2E034 (10/97)