

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham,
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S51243

(1)

1. Corporation Name

AVENUE PRODUCTIONS INC.



Principal Place of Business

**2810 E. OAKLAND PARK BLVD.
STE. 308
FT LAUDERDALE FL 33306
US**

Mailing Address

**2810 E. OAKLAND PARK BLVD.
STE. 308
FT LAUDERDALE FL 33306
US**

2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**STEIN, ROBERT
2452 NW 26TH CIR.
BOCA RATON FL 33431**

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

05/06/1991

3a. Date of Last Report

05/23/1995

4. FET Number

65-0261011

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 has liability for intangible tax under s. 190.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0602 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, hereby accept the appointment as registered agent. I am familiar with, and accept the designation of, Section 607.0605, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETED

**D
STEIN, ROBERT
2452 NW 26TH CIR.
BOCA RATON FL**

2. TITLE ☐ DELETED

**D
STEIN, KAREN
2452 NW 26TH CIR.
BOCA RATON FL**

3. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

4. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

5. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

6. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

7. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

8. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

9. TITLE ☐ DELETED

NAME

STREET ADDRESS

CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

2. NAME

3. STREET ADDRESS

4. CITY, ST, ZIP

5. TITLE ☐ Change ☐ Addition

6. NAME

7. STREET ADDRESS

8. CITY, ST, ZIP

9. TITLE ☐ Change ☐ Addition

10. NAME

11. STREET ADDRESS

12. CITY, ST, ZIP

13. TITLE ☐ Change ☐ Addition

14. NAME

15. STREET ADDRESS

16. CITY, ST, ZIP

17. TITLE ☐ Change ☐ Addition

18. NAME

19. STREET ADDRESS

20. CITY, ST, ZIP

21. TITLE ☐ Change ☐ Addition

22. NAME

23. STREET ADDRESS

24. CITY, ST, ZIP

25. TITLE ☐ Change ☐ Addition

26. NAME

27. STREET ADDRESS

28. CITY, ST, ZIP

29. TITLE ☐ Change ☐ Addition

30. NAME

31. STREET ADDRESS

32. CITY, ST, ZIP

33. TITLE ☐ Change ☐ Addition

34. NAME

35. STREET ADDRESS

36. CITY, ST, ZIP

14. I do hereby certify that the information supplemented with this report voluntarily furnished and does not qualify for the exemption stated in Section 19.07(b)(6), 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 or changed or on any other report with an address.

SIGNATURE:

Robert Stein **Robert STEIN**

3/30/96 **3/30/96 9545611226**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

CR2E034 (12/95)