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PROFT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S73705

(3)

Mailing Address

FIVE STAR PRODUCTIONS USA, INC.

FILED
Mar 25 1997 8:00am
Secretary of State

SUITE 100 BOCA RATON	RAL HWY. FL 33487	5301 N. FEDERAL HWY. SUITE 100 BOCA RATON FL 33487-41	917	3. Date Incorporated or Qualified 08/14/1991	3a. Date of Last Report 03/05/1996
'	ane of Business	2a, Mailing Address	<i>o</i>	4. FEI Number	Applied For
1/30	S COMERCESS.	Avr. 26 430 S. C Sure, Apt #, etc.	Congress. An	c. 65-0488368	Not Applicable
Si. te, Apt 2		27	V	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 3 Dc /re	6.1	Fl 28 Delray Br	ech Fl	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
3344 4	5 25 Polm Be	och 29 33445	Country 30 Polm Beach	8. This corporation has liability for in Florida Statutes	Yes No
	9, Name and Address of Ci	urrent Registered Agent	81 Name	10. Name and Address of New Reg	lstered Agent
530 SUI GUC	LLEY, SCOTT 11 N. FEDERAL HWY. TE 100 CA RATON FL 33487 to the provisions of Sections 607	7.0502 and 607 1508, Florida Statut State of Florida Such change was	82 Street Add 83 84 City	dress (P.O. Box Number is Not Acceptable Control of Street St. To Beach FL position submits this statement for the protition's board of directors. I hereby acceptation's board of directors.	FL 85 Zip Code 33445 urpose of changing its registered
	er familiar with, and accept the c	obligations of, Section 607.0505, Flo		,	DATE
lilet	PST	DELETE	11 TITLE	PST	Change Addition
NAME	WOOLLEY, SCOTT		12 NAME	Woulley Scott	
STREET ADDRESS	5301 N FEDERAL HWY S'	TE 100	13 STREET ADDRESS	120 & CONCERS A	ve
DIV SI ZIF	BOCA RATON FL		1.4 CITY - ST - ZIP	Noolley, Scott 130 S. CONGRESS A Delray Beach Fl	33445
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4. For hereby certay that the intermation stepp ised with this hing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the influence of 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, the Lam an officer or director of the corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 33 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND LYDES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/97 5W-279-STAR