FILED Apr 08, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1. Corporation	NIEN I # S//840 S ANIMATION GALLERY, II								
Principal Place of Business : Mailing Address						T (EditBib in 1001) intel insit aran		Atl mens atati a	JUNEA MARKE 3001
415 PLAZA REAL 415 PLAZA REAL BOCA RATON FL 33432 BOCA RATON FL 33432						DO NOT WOL	- W 7110	604CF	
-						DO NOT WRIT	= IN THIS	SPACE	
						3. Date Incorporated or Qualifed 09/03/1991			
Principal Place of Business 2a. Mailing Address						, 4. FEI Number			plied For
21		26	1 1			65-0289682			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		\$8.75 A Fee Re	
City & State	e -, · · ·	. City & State	-			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip	Country	Zip	Cou	ntrv		8. This corporation owes the curre	nt vear Int		
24	25	29	30	,		Personal Property Tax.	ne your ma		□No
241	9. Name and Address of Curre		1001	_		10. Name and Address of New Ro	gistered	gent	
			•	81	Name				
MARCUS, PAUL R 9990 S W 77TH AVE				82	Street Add	ress (P.O. Box Number is Not Acceptal	ale)		
PENTHOUSE ONE			,	83			•		
MIAMI FL 33156					0.0			85 Zip C	- odo
				84	City		FL	85 Zip C	200e
office or n	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblic	e of Florida. Such change wa gations of, Section 607.0505,	is authorized Florida Stati	iby intes.	the corporation	poration submits this statement for the pon's board of directors. I hereby accept	. те арроп	changing its ntment as req	registered gistered
	Signature, typed or printed name of registered a	· · · · · · · · · · · · · · · · · · ·		Agen	t signature require	ed when reinstating)	DATE	D DIRECTO	DC IN 12
12.		AND DIRECTORS	13.	-		ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition
TITLE	P MARQUE EDIC	□ netre ie							
NAME	MARCUS, ERIC		1.2 N/						
STREET ADDRESS	415 PLAZA REAL BOCA RATON FL				ADDRESS				1
CITY-ST-ZIP				TY-SI TLE	1-23P	 		· [7] Change	Addition
TITLE			2.2 N						_
NAME STREET ADDRESS					ADDRESS				
			2.40		1				1
CITY-ST-ZIP TITLE		☐ DELETE		_	,,-,,,			☐ Change	☐ Addition
NAME	-		3.2 N/	AME		الواصف فالمحالي المهامد ميت ليادا	*	*	- [
STREET ADDRESS			3.3 \$1	REET	TADDRESS				
CITY-ST-ZIP			3.4. C	ITY-S	T-ZIP				
TITLE		☐ DELETE		_				Change	☐ Addition
NAME			4. 2 N	AME	1				
STREET ADDRESS	·		4.3 \$1	TREET	ADDRESS				
CITY-ST-ZIP				TY-\$1	T-ZIP	<u>-</u>			
TITLE		☐ DELETE						Change	Addition
NAME:	,		5.2 N		- 1				ĺ
STREET ADDRESS	,				TADDRESS				
CITY-ST-ZIP			5.4 CI		T-ZIP				
TITLE		☐ DELETE						Change	Addition
NAME			6.2 N	AME					Į

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 changes of on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

561 391-2117