

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

FILED  
Feb 03 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S82966** (0)  
1. Corporation Name  
**ATLANTIC SHOW PROMOTIONS, INC.**



Principal Place of Business <b>2532 NORTHEAST 9TH STREET FORT LAUDERDALE FL 33304</b>	Mailing Address <b>2532 NORTHEAST 9TH STREET FORT LAUDERDALE FL 33304</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>17211 123 Terrace No.</b> Suite, Apt. #, etc.		2a. Mailing Address 26 <b>17211 123 Terrace No.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>09/25/1991</b>	
22 City & State 23 <b>Jupiter, FL</b> Zip Country 24 <b>33478</b> 25 <b>USA</b>		27 City & State 28 <b>Jupiter, FL</b> Zip Country 29 <b>33478</b> 30 <b>USA</b>		4. FEI Number <b>65-0285588</b> Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

**\$8.75 Additional  
Fee Required**  
**\$5.00 May Be  
Added to Fees**

9. Name and Address of Current Registered Agent <b>SMITH, ROBERT 2532 N.E. 9TH STREET FT. LAUDERDALE FL 33304</b>				10. Name and Address of New Registered Agent 81 Name <b>Robert Smith</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>17211 123 Terrace No.</b> 83 84 City <b>Jupiter</b> FL 85 Zip Code <b>33478</b>			
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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 **Robert Smith - President** DATE **11/21/98**  
Signature, typed or printed name of registered agent and not applicable (NOTE: Registered Agent signature required when re-stating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	<b>DTS</b>	<input type="checkbox"/> DELETE		1.1 TITLE	<b>P Robert Kenneth Smith</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>SMITH, ROBERT KENNETH</b>			1.2 NAME			
STREET ADDRESS	<b>2532 N.E. 9TH STREET</b>			1.3 STREET ADDRESS	<b>17211 123 Terrace No.</b>		
CITY-ST-ZIP	<b>FT LAUDERDALE FL</b>			1.4 CITY-ST-ZIP	<b>Jupiter, FL 33478</b>		
TITLE		<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				2.2 NAME			
STREET ADDRESS				2.3 STREET ADDRESS			
CITY-ST-ZIP				2.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 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.

SIGNATURE: **Robert Smith** DATE: **11/21/98**

CR2E034 (10/97)