

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # S97736 (0)

1. Corporation Name

LUMINART PRODUCTIONS, INC.



Principal Place of Business

Mailing Address

1273 CORAL WAY
MIAMI FL 33145

1273 CORAL WAY
MIAMI FL 33145

3. Date Incorporated or Qualified
12/04/1991

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 2157 S.W. 13th Ave
Suite, Apt. #, etc.

26 2157 S.W. 13th Ave
Suite, Apt. #, etc.

4. FCI Number

65-0367731

Applied For

Not Applicable

22

27

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

City & State

City & State

23 Miami, Florida

28 Miami, Florida

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33145

25 U.S.A

29 33145

30 U.S.A

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALOMO, MERCEDES
1273 CORAL WAY
MIAMI FL 33145

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

Signature, typed or printed name of registered agent and their applicable

(NOTE: Registered Agent's signature required when reappointing)

DWR

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME PALOMO, MERCEDES
STREET ADDRESS 1273 CORAL WAY
CITY-ST-ZIP MIAMI FL

☐ DELETE

11 TITLE ☐ Change ☐ Addition

TITLE D
NAME PALOMO, LUIS
STREET ADDRESS 1273 CORAL WAY
CITY-ST-ZIP MIAMI FL

☐ DELETE

12 NAME ☐ Change ☐ Addition

TITLE D
NAME BURES, MARIA
STREET ADDRESS 1273 CORAL WAY
CITY-ST-ZIP MIAMI FL

☐ DELETE

13 STREET ADDRESS ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

14 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

15 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

16 CITY-ST-ZIP ☐ Change ☐ Addition

17 NAME

18 STREET ADDRESS

19 CITY-ST-ZIP

20 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Mercedes Palomo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/96 305-856-2929

CR2E034 (3/96)