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

DOCUMENT # V02027 1. Corporation Name

CONQUEST PRODUCTIONS, INC.

Principal Place of Business Mailing Address										
2450 SUNSET POINT RD		CONQUEST	CONQUEST		j					
SUITE A	BOX 674			DO NOT WE	ITE IN THIS	SPACE				
CLEARWATER FL 33765 PALM HARBOR FL 34682					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified					
US					12/20/1991	•]	
2 Drivainal Di	lace of Business	2a. Mailing Address		 	4. FEI Number			Applied	For	
-	ace of pusitiess	26			NOT APPLICABLE		→	Not App		
Suite, Apt. :	# etc	Suite, Apt. #, etc.	 -				\$8.75	5 Additio	onal	
22		27			5. Certifcate of Status Desired		Fee	Required	d	
City & State	9	City & State			- 6 Election Campaign Financing	J	\$5.0	0 May	Ве	
23		28			Trust Fund Contribution					
Zip	Country	Zip	Zip Country		8. This corporation owes the current year Intangible					
24	25	29 30	Ĺ		Personal Property Tax.		☐Yes			
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New	Registered /	Agent		—	
סבוס	NEL CATHERINE		81	Name						
REICHEL, CATHERINE				82 Street Address (P.O. Box Number is Not Acceptable)						
1721 GEORGIA AVE				<u> </u>						
PALI	M HARBOR FL 34683		83							
			84	City	·	FL	85 Zi	ip Code		
		0 J CO7 4E09 Elecido Statutas	the show	- named o	corporation submits this statement for the	e numose of	changing	its regis	tered	
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auth	onzed by	the corpor	ration's board of directors. I hereby acc	ept the appoir	ntment as	register	ed	
SIGNATURE									/·	
	Signature, typed or printed name of registered age			nt signature re	quired when reinstating)	DATE	O DIDEC	TOPS	V 12	
12.	,,,,,,,,,,,	D DIRECTORS	13.	—Т	ADDITIONS/CHANGES TO O	FFICERS AN	Chang		Addition	
TITLE	DC	□ betere		ļ			<u> </u>]	
NAME	REICHEL, RICHARD R.		1.2 NAME							
STREET ADDRESS	1721 GEORGIA AVE.		1.3 STREET ADDRESS						}	
CITY-ST-ZIP	PALM HARBOR FL		1.4 CITY-ST-ZIP				Chanc	ле ГП	Addition	
TITLE	UF							, .		
NAME	V			- +000000						
STREET ADDRESS 1721 GEORGIA AVE.			2.3 STREET ADDRESS							
CITY-ST-ZIP	PALM HARBOR FL		2.4 CITY-ST-ZIP				Chanç	ne .	Addition	
TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		3.1 IIILE 3.2 NAME			- - -		بر		
NAME	REIOTIEE, TROCTOR TO		3.2 NAME 3.3 STREET ADDRESS						1	
STREET ADDRESS	T/E/ GEGTIGHT TITE.			1						
CITY-ST-ZIP	PALM HARBOR FL	DELETE	3.4, CITY-5 4.1 TITLE	ST-ZIP			☐ Chang	ae l'	Addition	
TITLE	D OTTO TO SEE	C) Detere]				o- u_	' '	
NAME	SWIFT, STEVE LEE	,	4.2 NAME						{	
STREET ADDRESS		·		T ADDRESS	•					
CITY-ST-ZIP	BELLEAIR BEACH FL		4.4 CITY-S	T-ZIP			Chang	ge F] Addition	
TITLE	D WARRANATOR WILLIAM	(*) DETE IE	5.1 TITLE 5.2 NAME				0.000	<i>ه</i> ٠ ـ		
NAME	KARAVATOS, WILLIAM	IODTII		7.ADDRESS					į	
STREET ADDRESS	1722 HICKORY GATE DRIVE N	ואאווו	5.4 CITY-S						ľ	
CITY-ST-ZIP	DUNEDIN FL	[] priere	6.1 TITLE	11-217			Chan	ne 🍽	Addition	
TITLE	i	☐ DELETE	0.1 []11.02		D			ე~ #△	,	

63.STREET ADDRESS 800 /CNVEWS CIRCLE
NO. 202
ALTA MONTE SPRINGS, FL.

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 or on an attachment with an address, with all other like empowered.

62 NAME

SIGNATURE:

NAME

KAREN MOTLEY

800 RAVENS CIRCLE

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90117 009 ***150.00