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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V31625

(9)

THEE DOLLHOUSE PRODUCTIONS N.C., INC.

Principal Place of Business Mailing Address 2301 DELMAR PLACE 2301 DELMAR PLACE FT LAUDERDALE FL 33301-1509 FT LAUDERDALE FL 33301 3. Date Incorporated or Qualified 3a. Date of Last Report 04/27/1992 05/01/1996 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address STEB 1308 ROSE BLVD, 65-0366091 Not Applicable 1308 LOSE BLUD, 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be ORLANI OELANDO Trust Fund Contribution Added to Fees 23 Country USA This corporation has liability for intangible tax under s. 199.032, 32839 Florida Statutes Yes No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM INC. **1201 HAYES ST.** Street Address (P.O. Box Number is Not Acceptable) STE 105 83 TALLAHASSEE FL 32301 84 City Zip Code 85 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 pictited trame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 96/6) 12. DELETE Change Addition 1.1 TITLE TITLE BOLES, LATED M. 1308 ROSE BLUD, STEB CHURCH, LAWRENCE 1.2 NAME NAME 3365 N FEDERAL HWY STREET ADDRESS 13 STREET ADDRESS FT LAUDERDALE FL CITY-ST-7IP 14 CITY-ST-ZiP DELETE Change Addition 2.1 TITLE TITLE PETER, MICHAEL J NAME 2.2 NAME 3365 NO FEDERAL HWY 2.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY - ST - 7(P Change Addition DELETE 3.1 TITLE THILE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHTY - ST - ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP 14. I do 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