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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

V36386 DOCUMENT #
1. Corporation Name

(3)

REEL MAGIC PRODUCTIONS, INC.

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еппорагласе с	of Business	Mailing Address					
10843 N.W.		18850 NW 19					
			INES FL 33029				
		UƏ	US		 Date incorporated or Qualified 05/15/1992 	3a. Date of Last 01/17/	
2. Principal Plac	ce of Business	2a. Mailing Addre	ss		4. FEI Number		Applied For
1		26			65-0333899		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #,	etc.		5. Certificate of Status Desired		75 Additional e Required
Oty & State		City & State			6. Election Campaign Financing		.00 May Be
J		28			Trust Fund Contribution		ded to Fees
<i>Z</i> ip 	Country	Zιρ	Cour	ıtry	8. This corporation has liability for it Florida Statutes X Yes		18 199.032,
l	25 9 Name and Address of Curre	29 ent Registered Agent	1301	-	10. Name and Address of New R		
	g. Hallie and Address of Con-	cit tregistered rigett		B1 Name		. <u></u>	-
GIACCI	HETTO, MICHAEL C.				iress (P.O. Box Number is Not Acceptab	let	
	NW 19 CT		82 Stre		ress (io., dox mornider is mot acceptabl	ioj	
PEMBROKE PINES FL 33029			Ī	83			
			-	84 City		— 85	Zip Code
				'	oration submits this statement for the pur	FL "	
12.		AND DIRECTORS	13. If 1.110		ADDITIONS/CHANGES TO OFF	ICERS AND DIREC	
ITLE	DPTS	DELE		ILF			
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	DEMODRIZE DINEC EI			'			
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OLE IAME TREET ADDRESS	PEMDRONE PINES TE	☐ DELE	TE 2 1 11 2 2 NA 2 3 ST	IY+S1-ZIP FLE ME REET ADDRESS		☐ Chan	ge [] Addition
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NAME STREET ADDRESS CITY - ST - ZIP OTILE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	PEMIDRONE PINES (L	DELI	TE 2 111 22 NA 23 SI 24 CI 31 TI 32 NA 33 S' 34 CI TE 4 1 TI 42 NA 43 SI 44 CI ETE 5 1 TI 52 NA 53 SI 54 CI ETE 6 1 TI 62 NA	IY-S1-ZIP FLE ME ME ME ME ME ME ME IY-S1-ZIP LE ME IREEL ADDRESS IY-S1-ZIP ILE ME ME ME ME ME ME ME ME ME		☐ Chan	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PEMIDRONE PINES (L	DELI	TE 2 111 22 NA 23 SI 24 CO 3 1 TI 32 NA 33 S' 34 CC TE 4 1 TI 42 NA 43 SI 44 CO 5 1 TI 52 NA 53 SI 54 CC ETE 6 1 TI 62 NA 63 SI	IY-S1-ZIP FLE ME HEEL ADDRESS IY-S1-ZIP TLE IME HEEL ADDRESS IY-S1-ZIP TLE HEEL ADDRESS IY-S1-ZIP TLE HEEL ADDRESS IY-S1-ZIP TLE HEEL ADDRESS IY-S1-ZIP TLE HEEL ADDRESS IY-S1-ZIP		☐ Chan	ge Addition

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 logal 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:

430 - 8646 Dayline Propert