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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90004 012 ***150.00

DOCUMENT	#	V36386
1. Corporation Name		

REEL MAGIC PRODUCTIONS, INC.

Principal Place	of Business	Mailing Address				ili kiyana sirsk brinn silas	IMILA MILL MINE	EIDII GIBII DIDII B	E()
10843 NW 3RD		10843 NW 3RD CT			1				
PEMBROKE PIN		PEMBROKE PINES FL 33026	3			,			
US		US			<u> </u>		RITE IN THIS	SPACE	
	•				· ·	orporated or Qualife	d		
					05/15/				Mod For
	ace of Business	2a. Mailing Address			4. FEI Num 65-033				Applicable
21	4 -1-	Suite, Apt. #, etc.			03-033	<u> </u>		\$8.75 A	
Suite, Apt.	#, etc.	27			5. Certifcat	e of Status Desired		Fee Red	-
City & State	, , , , , , , , , , , , , , , , , , ,	City & State			6. Election	Campaign Financing	<u> </u>	\$5.00	May Be
23	_	28				nd Contribution	"	Added to	
Zip	Country	Zip	Count	ry	8. This corp	poration owes the cu	ırrent year İn	tangible	
24	25	29	30			Property Tax.			□No
	9. Name and Address of Current	t Registered Agent			10. Name a	nd Address of New	Registered	Agent	
CIAC	COUETTO MICHAEL C		8	Name	2 had	G, Acch	otts		
1	CCHETTO, MICHAEL C.		8			Number is Not Accer		_	
	O NW 19 CT			1081	43 NO	314 C1		_	
PEM	BROKE PINES FL 33029		8	3					
ļ	•		8	4 CityO.	mbruke "	<u>D </u>		85 Zip C	ode
1				1 16	WOUN	Pines	Fl		0.7 C
					U				
-11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute of Florida, Such change was au	s, the abouthorized b	wo named co	omoration submits	this statement for fr rectors. I hereby acc	ept the appo	intment as reg	pistered
l office or n	to the provisions of Sections 607.050 egistered agent, or both, in the State of familiar with, and accept the obligat	of Florida. Such change was au	unonzea a	ove-named co by the corpora	omoration submits	ectors, i nereby acc	ept the appo	Antinoni as reg	pistered
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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, with all other like empowered.