FILI	E NOW: FILI	ING FEE AFTE	R MAY 1 IS	\$225 00		
PROFIT CORPORATION ANNUAL-REPORT 1996			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		, ,	
DOCUI	MENT #	V45104	(9)			
, , , , , ,	n Name I ARTISTS IN I	MOTION, INC.	• • •			
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Principal Place			ng Address		E HORFI DISTRI DIDDI DILIFE INDI DIE	KA BABU BIDAN BIBIN GABIN DABIN BIBAN BIBIN ANGIN ANGIN
13751 NORTHWEST 7TH AVENUE MIAMI FL 33168 US			1451 SW 116 AVE PEMBROKE PINES FL 33025 US		3. Date incorporated or Qualified	3a. Date of Last Report
					06/18/1992	07/10/1995
2. Principal Pla 21	ace of Business	2a. ^	Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.		suite, Apt. #, etc		65-0340985	Not Applicable \$8.75 Additional
City & State		27	N. P. Craha		5. Certificate of Status Desired	Fee Required
23		28	Dity & State		6. Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Ζ _I ρ	Cour 25		ışı	Country	8. This corporation has liability for in	tangible tax under s. 199.032,
[24]		29 ress of Current Registe		30	Florida Statutes Yes 10. Name and Address of New Re	No egistered Agent
MIAMI •	SW 94TH TER FL 33186 to the provisions of 9 ad ed agent, or both or the th, and accept the obline	ctions 607.0502 and 607. le State of Privida Such o pations of Section 607.00	1508, Florida Statutes, rignige was arithorized 05, Florida Statutes.	84 City the above named corporation's boar	ANDUE Trailing submits this statement for the purport of directors. Thereby accept the appoint	FL 85 Zip Code 9 Ose of changing its registered office of the number of
	Skyrature typeof a printed over	e otropizació a portaminant ad		Registered Agend sajnature reques		DATE
12.	D	OFFICERS AND DIRECTO	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
NAME STREET ADDRESS	FURBUSH, TA 1451 SOUTHW PEMBROKE PI	VEST 116 AVENUE		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	TEMPTONE FI	MES FL	DELETE	1.4 CiTY - ST - ZIP 2.1 TiTLE		Change Addition
NAME				2.2 NAME		
STREET ADDRESS CITY-ST-ZIP				2.3 STREET ADDRESS		
TITLE			DELETE	3 1 Title -	MA: :	Change Addition
NAME				3.2 NAME		C availa: C requie.
STREET ADDRESS				3.3 STREET ADDRESS		
CITY-ST-ZIP				3.4 CITY - \$1 - ZIP		
TITLE NAME			☐ DELETE	4 1 TI'LE		Change Addition
STREET ADORESS				4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP				4.4 CITY - \$1 - ZIP		
TITLE			☐ DELETE	5 1 TITLE		Change Addition
NAME CEOSES ARRESSOS				5.2 NAME		
STREET ADDRESS				5 3 STREET ADDRESS		
CITY - ST - ZIP TITLE			DELETE	6 1 TIFLE		Addit on
NAME				62 NAME	60000192 -08/20/960110 ***225_00	
STREET ADDRESS				6.3 STREET ADDRESS	_00/28/30011(***3000	93031

CITY-ST-2IP

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 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.

SIGNATURE:

Auxmank()

Au

SIGNATURE:

SIGNATURE AND TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR