## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # V55054

ILLUSIONS ENTERTAINMENT CORP. OF BREVARD, INC.

**FILED** Apr 25 1997 8:00am Secretary of State



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Principal Place of Business Mailing Address						3 (201) ATTER ATTER STATE SOLES ATTER SOLES ATTER STATE ATTER ATTER ATTER SOLES ATTER SOLES ATTER ATTER ATTER SOLES ATTER ATTE		
3466 ATLANTIC AVENUE COCOA BEACH FL 32931 COCOA BEACH FL 32931								
						3. Date Incorporated or Qualified   3a. Date of Last Report		
						08/04/1992 08/28/1996		
2. Principal P	lace of Business	2e. Mailing Address				4. FEI Number Applied For		
		26				<b>59-3137421</b> Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & Staf	e	City & State				6. Election Campaign Financing \$5.00 May Be		
3		28				Trust Fund Contribution Added to Fees		
Zip n	Country	Zφ	<del></del> -	untry		8. This corporation has liability for intangible tax under s. 199.032,		
J	25	[29]	30	<del></del>	<del></del>	Florida Statutes Yes No		
	9. Name and Address of Curren	Registered Agent		81	Name	10. Name and Address of New Registered Agent		
	KHAM, KENNETH V			"	warne	,		
	6 SOUTH ATLANTIC AVENUE			82 Street		t Address (P.O. Box Number is Not Acceptable)		
COC	COA BEACH FL 33931			83				
				84	City	FL 85 Zip Code		
I1. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Elorida Statut	es, the a	bove	-named			
office or r	registered agent, or both, in the State	of Florida, Suci Change was a	authorize	d by	the corp	d corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered		
	im lanillar with, and accept the boliga	lights of Section 107.0005, Fic	onua sia	wes		du lan		
SIGNATURE	Signature, typed or printed name of registered age	nt and trie it applicable (NOT	E: Registere	d Ape	nt Bionalure	rie required when reinstating)  DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	DELETE	1.1 T	ITLE		PSD . Addition		
IAME	TINKHAM, KENNETH V		1.2 N	AME		Bradley, Diana Avenue 3446 5. Attantic Avenue		
TREET ADDRESS	3466 S ATLANTIC AVE		1.3 STREE		ADORESS	3446 5. Attentio		
uty - St - ZIP	COCOA BEACH FL 32931		1	ITY-S		Cocoa Beach, Fr 32931		
IITLI	STDB	DELETE	211					
MAME :	BRADLEY, DIANA		2.2 N	AME		TINKHAM, KEMETH V. DAICHange LAdditio		
STREET ADDRESS	3466 S ATLANTIC AVENUE		2.3 S	TREET	ADDRESS	and S Atlantic Pool		
CITY - \$1 - ZIP	COCOA BEACH FL 32931		1	CITY-S		Cocon Beach, FL 32931		
17LF	0000,,020,,120,00	DELETE	3.17			☐ Change ☐ Additio		
IAME		_	3.2 N	AME		-		
STREET ADORESS					ADDRESS :			
DITY-ST-7P				CITY-S				
IITUF		DELETE	4.1 T		- B-51	Change Addition		
NAME			4.21					
STREET ADORESS					ADDRESS			
DIY-ST-ZIP				ITY-S				
TITLE		DELETE	5.1 T			Change Addition		
IAMÉ		<del>_</del>	5.2 N					
TREET ADDRESS			1		ADDRESS			
CITY - ST - ZIP				ITY-S				
TILE		DELETE	6.1 7		£.It	Change Additio		
NAIME			6.2 N					
					ADDRESS			
STREET ADDRESS								
CITY - S1 - ZIP	1	- 111. A) ' E('		ITY-S		stated in Section 110 02/2Vi). Florida Statutos, Liurther carifu that the		

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 receive 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 appearment with an address.