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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9300003316 (7)

LOTUS HISPANIC REPS CORP.

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business	Mailing Address								18 8111 1981	
6290 SUNSET BLVD		6290 SUNSET BLVD								
STE 1600		STE 1600			DO NOT WRITE IN THIS SPACE					
LOS ANGELES CA 80028 US		LOS ANGELES CA 90028 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
						07/20/1993				
2. Principal Place of Busine		2a. Mailing Addre	5 \$			4. FEI Number	_		Ap	plied For
21 6290 Sunset	Blvd.	26 Same				95-353228	<u> </u>		, <u>t</u>	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Sta	tus Desired		,	Additional
22 Suite 1600	27 Same						Fee Re	<u></u>		
City & State	City & State Los Angeles, CA		City & State			6. Election Campai			\$5.00	
			Zip Country			Trust Fund Contr			Added t	
Zip 24 90028 2:	¬``'	29 Same	30		me	8. This corporation Personal Propert	•		_	angible] No
	nd Address of Current Re			T		10. Name and Add				1140
CABR E RA, JOSE					Name T	LOURDES PETER				
2655 LE JEANE ROAD				82		ress (P.O. Box Number is Not Acceptable)				
CORAL GABLES FL 33134					5 55t / tad	13386 N.W. 8T	h st.			
, 4		83								
<u>.</u>				84	City				5 Zip (9de 2
			<u>.</u>	Ш		1IAMI		- FL I		
11. Pursuant to the provision office or registered aber agent. I am familiar with	ns of Sections 607,0502 ar nt. or both, it the state of F	nd 607.1508, Florida Florida: Such chand	a Statutes, the a ie was authoriza	above ed by	named corp the corporal	ooration submits this sta tion's board of directors	tement for the Thereby acce	purpose of che of the appoin	anging it: Iment as	s registered reaistered
agent. I am familiar With	and acoust the objection	ns of, Section 607.0	505, Florida Sta	ilules				1/2 100		
SIGNATURE Signature typed to printed though of registering and time if applicable (NOT). Registered Agent signature required when reinstating) // DATE										
12.	OFFICERS AND D		13.			ADDITIONS/CHAP	IGES TO OFFI	CERS AND D	RECTOR	S IN 12
TITLE DCP		☐ DEL	ETE 1.1 T	ITLE					Change	Addition
NAME KRAUSHA	ar, richard b		1.2 N	IAME						
STREET ADDRESS 6290 SUN	ISET BLVD STE 1600		1.3 9	TREET	ADDRESS					
CITY-ST-ZIP LOS ANG	ELES CA		1.4 0	ITY-SI	r-ZIP					
TITLE DVCT		☐ DEL	ETE 2.1 T	ITLE					Change	☐ Addition
NAME SHRIFTMA	in, william		22 N	IAME						
	SET BLVD STE 1600		235	TREET	ADDRESS					l
CITY-ST-ZIP LOS ANG	ELES CA		2 4	CITY-S	r-ZIP					
TITLE DS		DEL	ETE 3.1 T	ITLE					Change	Addition
NAME PALEY, JO			3.2 N	AME						
	SET BLVD STE 1600		3.3 S	TREET	ADDRESS					
CITY-ST-ZIP LOS ANG	ELES CA			CITY · S	1-2IP					
TITLE VP		X DEL	FTE 4.1 T	ITLE					Change	Addition
NAME CABRERA			4.21	NAME						
	SET BLVD STE 1600		4.3 S	TREET	ADDRESS					
CITY-ST-ZIP LOS ANG	ELES CA		4.4 0	ITY-SI	-ZIP					
TITLE		☐ DEL	ETE 5.1 T	ITLE					Change	☐ Addition
NAME			5.2 N	IAME						-
STREET ADDRESS			5.3 9	TREET	address					
CITY-ST-ZIP				ITY-\$1	- ZIP					
TITLE		☐ DEL	ETE 6.17	ITLE					Change	Addition
NAME			6.2 N	IAME						
STREET ADORESS			6.3 \$	TREET	ADDRESS					
CITY-ST-ZIP			640	11Y-S1	- ZIP					
14 I hereby certify that the	nformation supplied with t	his filma does not a				Section 119 07(3)(i) Flo	rida Statutes	Lifurther certify	that the	information

indicated on this annual report or supplemental annual report is frue 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