


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Apr 13, 1999 8:00 am
Secretary of State

04-13-1999 90009 034 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000076332
 1. Corporation Name
WORLD MARDI GRAS AT FT. LAUDERDALE I, INC.

Principal Place of Business 12000-Biscayne-Bldv., Penthouse-810 Miami, FL-33181	Mailing Address 12000-Biscayne-Bldv., Penthouse-810 Miami, FL-33181
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2. Principal Place of Business 21 1850 S.E. 17th St. Causeway Suite, Apt. #, etc. 22 Suite 301 City & State 23 Fort Lauderdale, FL Zip 24 33316	2a. Mailing Address 26 518 North Highway 16 Suite, Apt. #, etc. 27 City & State 28 Denver, N.C. Zip 29 28037 Country 30 USA
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4. FEI Number 65-0879105	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
THOMAS K. IRELAND
12000 Biscayne Boulevard, Penthouse 810
Miami, FL 33181

10. Name and Address of New Registered Agent

81 Name CHRISTINA R. CASALS, ESQ.
82 Street Address (P.O. Box Number is Not Acceptable) 1177 S.E. 3rd Avenue
83 Fort Lauderdale
84 City FL
85 Zip Code 33316

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Christina R. Casals, Esq.* DATE: **4/6/99**

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	NOAH LAZES	
STREET ADDRESS	2767 NORTH HIGHWAY 16	
CITY-ST-ZIP	DENVER, N.C. 28037	
TITLE	D	<input type="checkbox"/> DELETE
NAME	THOMAS IRELAND	
STREET ADDRESS	12000 Biscayne Boulevard	
CITY-ST-ZIP	Miami, FL 33181	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	NOAH LAZES	
1.3 STREET ADDRESS	518 NORTH HIGHWAY 16	
1.4 CITY-ST-ZIP	DENVER, N.C. 28037	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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.

SIGNATURE: *Noah Lazes, Pres.* **NOAH LAZES-PRES.** X **4/7/99** 704/483-6266

CR2E034 (5/98)