

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

FILED

**Feb 27 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
----------------------------------------------------	-----------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------

DOCUMENT # S69538 (4)
1. Corporation Name
AARON MODEL AND TALENT AGENCY, INC.

Principal Place of Business 2803 E COMMERCIAL BLVD SUITE 202 FT. LAUDERDALE FL 33308	Mailing Address 2803 E COMMERCIAL BLVD SUITE 202 FT. LAUDERDALE FL 33308
--------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------



DO NOT WRITE IN THIS SPACE

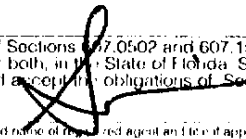
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/30/1991	
21 Suite, Apt. #, etc.	22 City & State	23 Zip	24 Country	25	26
21 Suite, Apt. #, etc.		2a. Mailing Address		4. FEI Number 65-0277716	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		25		29	
29		30		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
**O'DONNELL, ROBIN I
708 BREAKERS AVE.
STE. #3
FT. LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent

81 Name	STUART R. WEIN V.P.
82 Street Address (P.O. Box Number is Not Acceptable)	2803 E COMMERCIAL BLVD #202
83	FT LAUDERDALE
84 City	FL
85 Zip Code	33308

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:  DATE: **2/20/98**

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	WEIN, STUART R	
STREET ADDRESS	2803 E. COMMERCIAL BLVD	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	HOCHMAN, PAUL	
STREET ADDRESS	2803 E. COMMERCIAL BLVD.	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	WEIN, SIMI	
STREET ADDRESS	2803 E COMMERCIAL BLVD	
CITY-ST-ZIP	FT. LAUDERDALE FL	
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	PRESIDENT	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
1.2 NAME	SHIRLEY WEIN	
1.3 STREET ADDRESS	2803 E COMMERCIAL BLVD SU. 202	
1.4 CITY-ST-ZIP	FL LAUDERDALE FLORIDA 33308	
2.1 TITLE	VICE PRESIDENT	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	STUART R. WEIN	
2.3 STREET ADDRESS	2803 E COMMERCIAL BLVD SU. 202	
2.4 CITY-ST-ZIP	FT LAUD FL 33308	
3.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information submitted 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 as an attachment with an address.

SIGNATURE:  DATE: **2-20-97 (954) 772-8944**

CR2E034 (10/97)