SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLOR:DA DEPARTMENT OF STATE CORPORATION Sandra B. Morthani ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # 556003 (2)**ROCKETTE DANCE ACADEMY, INC.** Principal Place of Business Mailing Address 2922 N STATE RD 7 2922 N STATE RD 7 MARGATE FL 33063 MARGATE FL 33063 3a. Date of Last Report 3. Date Incorporated or Qualified 12/23/1977 04/25/1995 4. FEI Number 2. Principal Place of Business Mailing Address Applied For 2a. 59-1984129 Not Applicable 26 21 Suite Apt #, etc \$8.75 Additional Suite, Apt. #, etc. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country This corporation has liability for intang ble tax under s 199.032 Florida Statutes Yes No Zip Country Zip 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name **DOOLEY, CATHERINE** Street Address (P.O. Box Number is Not Acceptable) 82 2731 NE 14TH ST **APT 133 B** 83 POMPANO BCH FL 33062 Zip Code 84 City 85 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. Lam familiar with, and accept the obligations of Section 607,0505, Florida Statutes. SIGNATURE (NOTE: Bugished Agent signature required when renstating) Signature, typed or printed name of registered agent and lifte if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/96)OFFICERS AND DIRECTORS 13. 12. Change Addition PD DELETE 1 1 TITLE TITLE DOOLEY, CATHERINE 1.2 NAME CR2E034 NAME 4401 N.W.41ST ST.APT 401 1.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE KNOERR, MARY 22 NAME NAME 7041 ENVIRON BLVD 23 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2 4 CITY - ST-ZIP CITY - ST - ZIP Change Addition DELETE 3 1 THILE TITLE NAME 3 2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE DILE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4 4 CITY - ST-ZIP DELETE Change Addition 5 1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - 7(P CITY-ST-ZIP Change Addition DELETE TITLE 61 TIFLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-7IP 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

CATHERINE DOOLEY 6/6/96 9549730444