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

Apr 01 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATES ... CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State - * 1998 DIVISION OF CORPORATIONS DOCUMENT # F97000002619 (1) N/C 12/19/97 CAINE COMMUNICATIONS OF DELAWARE, INC. Witlex Group Principal Place of Business Mailing Address 251 ROYAL PALM WAY 251 ROYAL PALM WAY PALM BEACH FL 33480 PALM BEACH FL 33480 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/16/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-074045a 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Duite so, te Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 7ip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHERER, WARREN 251 ROYAL PALM WAY 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH FL 33480 83 City 84 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agont signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change TITLE 1.1 TITLE NAME SCHERER, WARREN 1.2 NAME 11855 RENE LACOSTE PLACE STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 CITY - ST- ZIP 1.4 CITY-ST-ZIP DELETE Channe Addition TITLE CP 2.1 T/IT/E CAINE, CY NAME 2.2 NAME STREET ADDRESS 2400 LAS OLAS BLVD., STE. 233 2.3 STREET ADDRESS FT. LAUDERDALE FL 33301 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3 1 1ITLE BROWN, MARTIN NAME 3.2 NAME **BROOK FARM HOUSE, BROOK SURREY** STREET ADDRESS 3.3 STREET ADDRESS UNITED KINGDOM GU85PX 3.4 CITY-ST-7/P CITY-ST-ZIP TITLE DELETE 4.1 TITLE Channe Addition WOODROW, GORDON NAME 4. 2 NAME STREET ADDRESS 865 LENAPE RD. 4.3 STREET ADDRESS WEST CHESTER PA 19380 CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 51 TITLE MACDONNELL, ROBERT A 52 NAME NAME 123 S. BROAD ST. STREET ADDRESS 53 STREET ADDRESS PHILADELPHIA PA 19109 CITY-ST-ZIP 5.4 CITY-ST-ZIP 80000<u>2475**40**</u>9‰ DELETE TITLE 6.1 TITLE -04/01/98--01069--006 6.2 NAME NAME ***150.00 STREET ADDRESS 6.3 STREET ADDRESS

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14. Thereby certify that the information supplies 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 supplies that are factorial and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation of the receipt of trustoe 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 given alter that my name address. 2)20/08 (BU)202-4424 CICNATUDE: X

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