

... FEE AFTER MAY 1 IS \$225.00



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

... ENT # **H70021** (1)

... SET STRIP CORP.
Sunset Strip Corp.



Principal Place of Business: 2800 28TH STREET STE 222, P.O. BOX 4060, SANTA MONICA CA 33306-1916
Mailing Address: 2800 28TH STREET STE 222, P.O. BOX 4060, SANTA MONICA CA 33306-1916

3. Date incorporated or Qualified: 08/01/1985
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2687461
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. Suite, Apt. #, etc.: 27
23. City & State: 28
24. Zip: 25, Country: 29, Zip: 30, Country: 30

9. Name and Address of Current Registered Agent: UNITED STATES CORPORATION COMPANY, 1201 HAYS STREET, SUITE 105, TALLAHASSEE FL 32301
10. Name and Address of New Registered Agent: 81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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 Agent signature required when reinstating) DATE:

12. OFFICERS AND DIRECTORS: PD GEARY, WILLIAM W. JR., ST SCHIEBEL, KATHRYN S., AS LAVELLE, BARBARA, J., T MEEK, GARY E.
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12: T William W. Geary, Jr., 2800 28th Street Suite 222, Santa Monica CA 90405

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: [Signature] 4/19/96 (310)450-9696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)