FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J23505 NASH ENTERTAINMENT, INC. Principal Place of Business Mading Address % CHARLES W. MUSGROVE % CHARLES W. MUSGROVE 2328 S. CONGRESS AVE., SUITE 1-D 2328 S. CONGRESS AVE., SUITE 1-D W. PALM BEACH FL 33406 W. PALM BEACH FL 33406 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/11/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2695357 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired 27 22 City & State City & State 8. Election Campaign Financing Trust Fund Contribution 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name MUSGROVE, CHARLES W. 2328 SOUTH CONGRESS AVENUE Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 1-D. CONGRESS PARK 83 W. PALM BEACH FL 33406 City

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.

Applied For

\$8.75 Additional

Fee Regulred

\$5.00 May Be

Added to Fees

☐ No

Zip Code

Yes

85

Not Applicable

SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13 DELETE TITLE 1.1 TITLE Change Addition NASH, BRUCE M. NAME 12 NAME 4083 FARMDALE AVE STREET ADDRESS 1.3 STREET ADDRESS STUDIO CITY CA CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing to be 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 supplied apport 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 of No receiver of 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 all achieves.

SIGNATURE:

BRYCE NASH