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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** J45872 (5) **AMERICAN JAI ALAI, INC.** Principal Place of Business Mailing Address 649 U.S. AWY, ONE afwy. One NORTH PALKI BEACH FL 33408 NORTH PALM BEACH FL 33408 3. Date Incorporated or Qualified 3a. Dale of Last Report 12/08/1986 04/20/1995 2. Principal Place of Business 4. FEI Number Applied For 65-0119568 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032.

Florida Statutes Yes No Palm Beh 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HARNEY, FRED B 82 Street A R3 H PALM BEACHLEL 33408 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes the above-named corporation office or registered agent, or both in the State of Florida. Such change was authorized by the corporation agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. ration submits this statement for the purpose of changing its registerent's board of directors. I hereby accept the appointment as registered ARNE) FRED ne 11, 1996 SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGE TO OFFICERS AND DIRECTORS IN 12 (36/8) **PCEO** TITLE DELETE 11 THLE Change Addition HARNEY, FRED B NAME 1.2 NAME CR2E034 9500 SOUTH AIA #109 STREET ADDRESS 13 STREET ADDRESS JENSEN BEACH FL CITY-ST-ZIP 14 CHY - ST - 7P DITE DELETE 21 TITLE Change Addition GLOAD, RICHARD NAME 2.2 NAME 649 U.S. HWY. ONE, STE. 10 STREET ADDRESS 2.3 STREET ADDRESS N. PALM BCH. FL CITY - ST - ZIP 2 4 CITY - ST - ZIP DELETE THLE 3 1 TITLE Change X Addition DWEN: MIN M NAME 3.2 NAME 65E-TEVENSIDE DR STREET ADDRESS 33 STREET ADDRESS PALMEDON: GARBERS FL CITY-ST-ZIP 34 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME FIELDING, EDWARD V 4 2 NAME STAFET ADDRESS 03 SW LINDEN STREET 4.3 STREET ADORESS STUART FL CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 I TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADORESS 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 CITY-ST-ZIP 6.4 CITY - ST - ZIP 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 1 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 trusted 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.

SIGNATURE: Tred Harney - FRED HARNEY - Assistant 6-11-96 1-407-762-1655