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

FILED TIRORA FLORIDA DEPARTMENT OF STATE Jan 29 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J47510 (9) INTERNATIONAL EXPOSITION CONSULTANTS, INC. Principal Place of Business Mailing Address % JAY THALHEIM % JAY THALHEIM 16820 SILVER OAK CIR. 16820 SILVER OAK CIR. DO NOT WRITE IN THIS SPACE DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 3. Date incorporated or Qualified 12/17/1986 2. Principal Place of Business 2a, Mailing Address FEI Number Applied For Not Applicable 21 26 58-1712821 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 THALHEIM, JAY 16820 SILVER OAK CIR. Street Address (P.O. Box Number is Not Acceptable) DELRAY BEACH FL 33445 83 Zip Code City 85 FL 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 (NOTE, Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title # applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change Addition TITLE NAME THALHEIM, JAY 1.2 NAME CR2E034 16820 SILVER OAK CIR. STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE D 2.1 TITLE THALHEIM, BETH 2.2 NAME NAME 16820 SILVER OAK CIR. 2.3 STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3,4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4,3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE ___ Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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 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 or an ettechment with an address.

SIGNATURE:

SIGNATURE SIGNATURE

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change

Addition