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

FILED Feb 12 1998 8:00am **PROFIT** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J61814 (6)MORNING STAR MEDIA GROUP, INC. Principal Place of Business Mailing Address 9427 LAKE LOTTA CIR. 9427 LAKE LOTTA CIR. GOTHA FL 34734 GOTHA FL 34734 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/09/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible □Ño Yes 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 SMITH, KENNETH W 81 Name 5082 W. COLONIAL DR. Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 141 ORLANDO FL 32808 63 **B4** Zip Code 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 pented name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change ☐ Addition SMITH, KENNETH W. NAME 1.2 NAME 9427 LAKE LOTTA CIR STREET ADDRESS 1.3 STREET ADDRESS GOTHA FL 34734 CITY+ST-ZIP 1.4 CITY-ST-ZIP SD DELETE 2.1 TITLE Change Addition TITLE SMITH, DIANA J. NAME 2.2 NAME 9427 LAKE LOTTA CIR. STREET ADDRESS 2.3 STREET ADDRESS GOTHA FL 34734 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE ☐ Addition TITLE 3.2 NAME 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 STREET ADDRESS 4.3 STREET ADDRESS

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

DELFTE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-\$1-ZIP

TITLE

TITLE

NAME

2-5-98

Change

Change

Addition

Addition