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

NAME

STREET ADORESS

SIGNATURE:

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 21 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # K84978 (1)JONATHAN GREEN STUDIOS, INC. Principal Place of Business Mailing Address 316 MORGAN ROAD 316 MORGAN ROAD NAPLES FL 34114 NAPLES FL_33961 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1989 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0123081 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zip - 34111 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 18 WEEDMAN, RICHARD 316 MORGAN ROAD Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34114 23 84 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change GREEN, JONATHAN NAME 1.2 NAME 316 MORGAN ROAD STREET ADORESS 1.3 STREET ADDRESS ついい CITY - ST - ZIP NAPLES FL 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE WEEDMAN, RICHARD 2.2 NAME STREET ADDRESS 316 MORGAN ROAD 2.3 STREET ADDRESS CITY-ST-ZIP NAPLES FL 2. 4 CITY-ST-ZIP DELETE TITLE 31 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST- ZIP 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE 5.1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change 6.1 TITLE ___ Addition

6.2 NAME

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 eath; 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 on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

1/8/98

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