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

CITY-S1-ZIP

FILED PROFIT Apr 03 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name (9) ARBORS RECORDS, INC. Principal Place of Business Mailing Address % MATTHEW J. DOMBER % MATTHEW J. DOMBER 1700 MCMULLEN BOOTH RD. STE C-3 1700 MCMULLEN BOOTH RD. STE C-3 **CLEARWATER FL 34619 CLEARWATER FL 34619** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/16/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-2976186 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees ZiD Country Ζip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes 29 30 g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DOMBER, MATTHEW J. 1700 MCMULLEN BOOTH RD, STE C-3 Street Address (P.O. Box Number is Not Acceptable) 82 CLEARWATER FL 34849- 33759 83 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 (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THLE DELETE Change Addition 1.1 TITLE NAME **DOMBER, MATTHEW J.** 1.2 NAME 6121 PALMA DEL MAR BLVD. STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 1.4 CITY-ST-ZIP **VPS** DELETE Addition TITLE Change 2.1 TITLE DOMBER, RACHEL NAME 2.2 NAME 6121 PALMA DEL MAR BLVD. STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DS DELETE TITLE 3.1 TITLE Change Addition WARD, JACK B. NAME 3.2 NAME 20 VESEY ST. STREET ADDRESS 3.3 STHEET ADDRESS **NEW YORK NY** CITY-S1-ZIP 3 4. CITY-ST-ZIP DELETE TILLE Change **4.1 TITLE** Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DILLETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6 4 CITY - S1 - ZIP 14. Thereby 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 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, of on an attachment with an address.

3/30/97

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