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 ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # L60878 (0)FRONT ROW READY, INC. Principal Place of Business Mailing Address 332 BRANDON BLVD. P. O. BOX 1417 HOLLENANN OR BRANDON FL 33511 BRANDON J. Date Incorporated or Qualified 3a. Date of Last Report 03/23/1990 05/01/1995 4. FEI Number Applied For 2. Principal Place of Business 65-0184361 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 This corporation has liability for intangible tax under s 199 032 Zιο Country USA Yes No 24 Florida Statutes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name COOK, JUDD R 1417 HOLLEMAN DRIVE Street Address (P.O. Box Number is Not Acceptable) 82 VALRICO FL 33594 83 Zip Code 84 85 City 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. Thereby 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) DAD Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/8) 12 13 Change Addition Ō DELETE 1.1 TITLE TITLE COOK, JEANETTE R 1.2 NAME NAME **CR2E034** 1417 HOLLEMAN DR STREET ADDRESS 1.3 STREET ADDRESS VALRICO FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE D 21 TITLE COOK, JUDD R 22 NAME NAME 1417 HOLLEMAN DR STREET ADDRESS 23 STREET ADDRESS VALRICO FL CITY-ST-ZIP 2 4 CITY - ST-7IP DELETE Change Addition TITLE 3.1 THILE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE 4 2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 7IP CITY-ST-ZIP DELETE S 1 TITLE Change Addition THEF 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 54 CITY - ST-ZIP DELETE Change Addition 6.1 THILE TITLE 62 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 64 CITY - SI - ZIP CITY-ST-ZIP 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changes, or on a suttachment with an address.

SIGNATURE