File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 5 117 32 177 3:51 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT # 198000000817** 1a. Principal Place of Business Address GALACTIC TELEVISION NETWORK, L.C. 7355 N.W. 41ST STREET 7355 N.W. 41ST STREET NIAMI FL 33166 MIAMI FL 33166 2 Principal Place of Business 3. Date Organized or Qualified 3a. State of Formation 2a. Mailing Address 06/17/1998 FLSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For 65-0848567 City & State City & State Not Applicable 6. Certificate of Status Desired Country Zip Country Žio \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office Name TOLIN, HARVEY 73,55 N.W. 41ST STREET MIAMI FL 33166 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt #, etc City 9. Pursuant to the provisions of Sections 608.416 and 608 508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. SIGNATURE. DATE (Registered Agent Accepting Appendition). (NOTE Registered Agent's gradual regions 1 ≠her resolution). 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGR TOLIN, HARVEY S 7355 N.W. 41ST STREET MIAMI FL 7355 N.W. 41ST STREET MGR HOBAN, CHIE-KYOUNG MIAMI FL CARROLL, CHRISTIANA 7355 N W 41 ST STREET MIAMI, FL MGR 137/143 HIGH STREET MGR SAUNDERS, PHIL SUTTON SURREY, SMITH UNITED KINGDOM 1000027323661---6 -03/02/93--01083--012 \*\*\*\*188.75 \*\*\*\*188.75 11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under earl), that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address (305) 718-9831

Harvey S. Tolin Managing Member

REAND TYPEO OR PRINTED NAME OF SIGNAR (MANAGING) MEMBER OF MANAGER.

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