FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **POCUMENT #** (0)M61194 LATIN SINGLES INTRODUCTIONS, INC. Principal Place of Business Malling Address 633 NE 167TH ST **% JOSEPH KOTLER** STE ROA 633 N.E. 167 STREET, SUITE 604 DO NOT WRITE IN THIS SPACE N MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 33162 3. Date Incorporated or Qualified 10/21/1987 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0053083 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 Trust Fund Contribution Added to Fees 23 Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KOTLER, JOSEPH 633 N.E. 167 STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 604 83 **NORTH MIAMI BEACH FL 33162** 84 City 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 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 OFFICERS AND DIRECTORS ☐ DELETE TITLE 1.1 TITLE Change Addition KOTLER, JOSEPH NAME 1.2 NAME 400 KINGS POINT DR #528 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL 33160 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE Change 21 TITLE NAME KOTLER, JOSEPH 22 NAME STREET ADDRESS 400 KINGS POINT DR #528 2.3 STREET ADDRESS MIAMI BEACH FL 33160 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP 4.4 DITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition MAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE 6.1 TITLE Change 6.2 NAME

63 STREET ADDRESS 6.4 CITY-ST-ZIP 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 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.

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Kotler 4/21/98

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STREET ADDRESS

SIGNATURE: