2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 27, 2001 8:00 am Secretary of State DOCUMENT # P00000108543 GLOBAL ENTERTAINMENT NETWORK, INC. 27-2001 90332 002 ***158.75 Principal Place of Business Mailing Address 4000 Hollywood Blvd. Ste 735 South Tower 4000 HOLLYWOOD BLVD. STE 735 SOUTH TOWER HOLLYWOOD FL 33021-6755 HOLLYWOOD FL 33021-6755 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1057718 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GABLE, MICHAEL P Street Address (P.O. Box Number is Not Acceptable) 4000 HOLLYWOOD BLVD, STE 735 SOUTH TOWER HOLLYWOOD FL 33021-6755 City Zip Codo 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Signature, typed or printed name of registered agent and title if applicable (NOTE: Redistered Agent signature required when reinstating) DATE SATTER NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Chack Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PT ☐ Delete TITLE Change ☐ Addition NAME KANN, THOMAS M NAM.E STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BLVD, STE 735 SOUTH TOWER CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021-6755 TITLE ☐ Delete ☐ Change Addition NAME KANN, THOMAS M STREET ADDRESS STREET ADDRESS 4000 HOLLYWOOD BLVD, STE 735 SOUTH TOWER CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021-6755 COLLOT, BERNARD TIME Change Addition NAME 4000 Holly wood Blod Ste735 HOLLY GODO FL 33 021 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CiTY-S1-ZIP 13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CR2E034 (10/00)

305-861302

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Thomas M. Kann, President 4/5/01

Daytime Phone #