FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED

DOCUMENT # P92000011284 (6)

95 MAY -1 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporate Name

MTV HOLDINGS, INC.

Principal Place of Business	Mailing Address
801 LAUREL OAK DRIVE SUITE 640 NAPLES FL 33963	801 LAUREL OAK DRIVE SUITE 640 NAPLES FL 33963

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified	3a. Date of Last Report
12/11/1992	04/25/1994

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

4. FEI Number: 65-0378398 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WOODWARD, MARK J WOODWARD, PIRES & ANDERSON, P.A. 801 LAUREL OAK DRIVE, SUITE 640 NAPLES FL 33963	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0501 and 607.1008, 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D NAME WOODWARD, MARK J STREET ADDRESS 801 LAUREL OAK DRIVE, SUITE 640 CITY-ST-ZIP NAPLES FL 33963	☐ Change ☐ Addition
TITLE D NAME PIRES, ANTHONY P JR STREET ADDRESS 801 LAUREL OAK DR, SUITE 640 CITY-ST-ZIP NAPLES FL	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is accurate and that each required amendment or addition has been made in accordance with Chapter 607, 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 12 or Block 13 above, or on an attachment with an address.

SIGNATURE: Mark J. Woodward 4/24/95 (813) 566-2131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone #

0331326 CP