FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000020715 (7)

1. Corporate Name
A.E. SHULMAN SPECIAL PRODUCTS ENTERTAINMENT, INC

Principal Place of Business	Mailing Address
% MIRIAM SHULMAN 7550 GLENDEVON LANE DELRAY BEACH FL 33484	% MIRIAM SHULMAN 7550 GLENDEVON LANE DELRAY BEACH FL 33484

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified: 03/19/1993
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0415521 — 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

SHULMAN, MIRIAM
7550 GLENDEVON LANE
DELRAY BEACH FL 33484

10. Name and Address of New Registered Agent

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 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 ______ Date ______

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	SHULMAN, DEAN
STREET ADDRESS	20 FOX HILL LANE
CITY-ST-ZIP	SHORT HILLS NJ 07078
TITLE	D
NAME	SHULMAN, EDWARD
STREET ADDRESS	16004 LANGHONE CT
CITY-ST-ZIP	TAMPA FL 33647
TITLE	D
NAME	TEPPEL WENDY
STREET ADDRESS	52 WARWOICK RD
CITY-ST-ZIP	GREAT NECK NY 11023
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(Change ☐ Addition ☐ — blocks 1–6: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP — blank)

14. 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 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.

SIGNATURE: Miriam Shulman — MIRIAM SHULMAN 4/26/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0203482 CP