SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P93000047491 (4)

1. Corporation Name

SOURCE INTERNATIONAL GROUP, INC.

Principal Place of Business	Mailing Address
C/O WENDY HART 1330 OCEAN DRIVE - 4TH FL. MIAMI BEACH FL 33139	C/O WENDY HART 1330 OCEAN DRIVE - 4TH FL. MIAMI BEACH FL 33139

3. Date Incorporated or Qualified: 07/07/1993
3a. Date of Last Report: 11/07/1995

2. Principal Place of Business	2a. Mailing Address
21	26 C/O ISLAND TRADING CO.
22 Suite, Apt #, etc	27 Suite, Apt #, etc. 825 EIGHTH AVE 24th FL
23 City & State	28 City & State NEW YORK, NY
24 Zip / 25 Country	29 Zip 10019 / 30 Country

4. FEI Number: 65-0426022 — 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
CORPORATION SERVICE COMPANY 1201 HAYS ST. TALLAHASSEE FL 32301	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 ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DPST	☐ DELETE	1.1 TITLE	DIRECTOR / PRESIDENT	☒ Change ☐ Addition
NAME	HART, WENDY		1.2 NAME	WENDY HART	
STREET ADDRESS	1330 OCEAN DRIVE - 4TH FLOOR		1.3 STREET ADDRESS	825 EIGHTH AVENUE 24th FL	
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CITY-ST-ZIP	NEW YORK, NY 10019	
TITLE	D	☐ DELETE	2.1 TITLE	VICE PRESIDENT	☐ Change ☒ Addition
NAME	MESTEL, LAWRENCE		2.2 NAME	STEPHANIE SAULTER	
STREET ADDRESS	825 8TH AVENUE - 24TH FLOOR		2.3 STREET ADDRESS	825 EIGHTH AVENUE 24th FL	
CITY-ST-ZIP	NEW YORK NY 10019		2.4 CITY-ST-ZIP	NEW YORK, NY 10019	
TITLE		☐ DELETE	3.1 TITLE	SECRETARY / TREASURER	☐ Change ☒ Addition
NAME			3.2 NAME	MEG FRIEDMAN	
STREET ADDRESS			3.3 STREET ADDRESS	825 EIGHTH AVENUE 24th FL	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	NEW YORK, NY 10019	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (3/96)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Meg Fried 6/18/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — Daytime Phone #