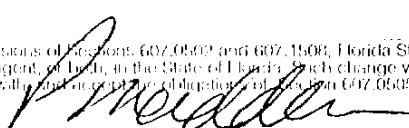


4-20-98 B 5150 C
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000088645 (5)					
1. Corporation Name: MADDEN CORPORATION					
Principal Place of Business: 1717 NO. BAYSHORE DR. #1944 MIAMI FL 33132 US		Mailing Address: 1717 NO. BAYSHORE DR. #1944 MIAMI FL 33132 US			
2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address: 26 PO Box 807 27 Suite, Apt. #, etc. 28 Newport RI 29 Zip 02840 30 Country			
9. Name and Address of Current Registered Agent MADDEN, PAUL M 1717 NO. BAYSHORE DR. #1944 MIAMI FL 33132					
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: 					
12. OFFICERS AND DIRECTORS 1. TITLE: P NAME: MADDEN, PAUL M STREET ADDRESS: 1717 NO. BAYSHORE DR., #1944 CITY-ST-ZIP: MIAMI FL 2. TITLE: ☐ DELETE NAME: ☐ DELETE STREET ADDRESS: ☐ DELETE CITY-ST-ZIP: ☐ DELETE 3. TITLE: ☐ DELETE NAME: ☐ DELETE STREET ADDRESS: ☐ DELETE CITY-ST-ZIP: ☐ DELETE 4. TITLE: ☐ DELETE NAME: ☐ DELETE STREET ADDRESS: ☐ DELETE CITY-ST-ZIP: ☐ DELETE 5. TITLE: ☐ DELETE NAME: ☐ DELETE STREET ADDRESS: ☐ DELETE CITY-ST-ZIP: ☐ DELETE					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE: ☐ Change ☐ Addition 1.2 NAME: ☐ Change ☐ Addition 1.3 STREET ADDRESS: ☐ Change ☐ Addition 1.4 CITY-ST-ZIP: ☐ Change ☐ Addition 2.1 TITLE: ☐ Change ☐ Addition 2.2 NAME: ☐ Change ☐ Addition 2.3 STREET ADDRESS: ☐ Change ☐ Addition 2.4 CITY-ST-ZIP: ☐ Change ☐ Addition 3.1 TITLE: ☐ Change ☐ Addition 3.2 NAME: ☐ Change ☐ Addition 3.3 STREET ADDRESS: ☐ Change ☐ Addition 3.4 CITY-ST-ZIP: ☐ Change ☐ Addition 4.1 TITLE: ☐ Change ☐ Addition 4.2 NAME: ☐ Change ☐ Addition 4.3 STREET ADDRESS: ☐ Change ☐ Addition 4.4 CITY-ST-ZIP: ☐ Change ☐ Addition 5.1 TITLE: ☐ Change ☐ Addition 5.2 NAME: ☐ Change ☐ Addition 5.3 STREET ADDRESS: ☐ Change ☐ Addition 5.4 CITY-ST-ZIP: ☐ Change ☐ Addition 6.1 TITLE: ☐ Change ☐ Addition 6.2 NAME: ☐ Change ☐ Addition 6.3 STREET ADDRESS: ☐ Change ☐ Addition 6.4 CITY-ST-ZIP: ☐ Change ☐ Addition					

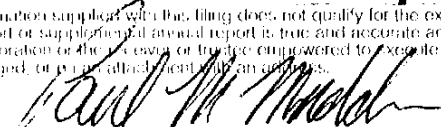


DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/01/1994	
4. FEI Number 65-0457477	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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
10. Name and Address of New Registered Agent	

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83 City	
84 City	FL
85 Zip Code	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 owner 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 in an attached report or amendment.

SIGNATURE: 

4/19/98 401 842-7937

CR2E034 (10/97)