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CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:40

DOCUMENT # P94000019637 (5)

1. Corporation Name
GREEN EXPOSITIONS INC

Principal Place of Business	Mailing Address
10151 UNIVERSITY BLVD. SUITE 221 ORLANDO FL 32817	10151 UNIVERSITY BLVD. SUITE 221 ORLANDO FL 32817

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 03/10/1994
3a. Date of Last Report: N/A

2. Principal Place of Business
21: 1265 S. SEMORAN BLVD
22 Suite, Apt. #, etc.: SUITE 1244
23 City & State: WINTER PARK, FL
24 Zip: 32792 25 Country: U.S.A

2a. Mailing Address
26: 1265 S. SEMORAN BLVD
27 Suite, Apt. #, etc.: 1244
28 City & State: WINTER PARK FL
29 Zip: 32792 30 Country: USA

4. FEI Number: 59-3235166 ☐ 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

GOLDMAN, PETER
10151 UNIVERSITY BLVD.
SUITE 221
ORLANDO FL 32817

10. Name and Address of New Registered Agent

81 Name: PETER GOLDMAN
82 Street Address (P.O. Box Number is Not Acceptable): 1265 S. SEMORAN BLVD
83: SUITE 1244
84 City: WINTER PARK FL 85 Zip Code: 32792

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: P Goldman — MAR 1 95
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	DPV	1.1 TITLE	☑ Change ☐ Addition
NAME	GOLDMAN, PETER	1.2 NAME	
STREET ADDRESS	10151 UNIVERSITY BLVD., SUITE 221	1.3 STREET ADDRESS	1265 S. SEMORAN BLVD suite 1244
CITY-ST-ZIP	ORLANDO FL 32817	1.4 CITY-ST-ZIP	WINTER PARK, FL 32792
TITLE	ST	2.1 TITLE	☑ Change ☐ Addition
NAME	GOLDMAN, PETER	2.2 NAME	
STREET ADDRESS	10151 UNIVERSITY BLVD., SUITE 221	2.3 STREET ADDRESS	1265 S. SEMORAN BLVD, SUITE 1244
CITY-ST-ZIP	ORLANDO FL 32817	2.4 CITY-ST-ZIP	WINTER PARK, FL 32792
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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)(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: P Goldman — MAR 1 95 (407) 671-1948
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0060851 CP