FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P94000020345 (2)

1. Corporation Name
LIGNUM VITAE ENTERTAINMENT, INC.

Principal Place of Business	Mailing Address
610 NW 183RD ST. SUITE 101 MIAMI FL 33169	P.O. BOX 69-3186 MIAMI FL 33169

3. Date Incorporated or Qualified: 03/14/1994
3a. Date of Last Report: 09/25/1995
4. FEI Number: 65-0483861 — 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

2. Principal Place of Business
21 6848 S.W. 37th ST
22 Suite, Apt. #, etc
23 City & State: Miramar, Florida
24 Zip: 33023 25 Country: U.S.A

2a. Mailing Address
26 P.O. Box 69-3186
27 Suite, Apt. #, etc.
28 City & State: Miami, Florida
29 Zip: 33169 30 Country: U.SA

9. Name and Address of Current Registered Agent
MCMILLAN, JAMES M
3118 NW 39TH ST.
LAUDERDALE LAKES FL 33309

10. Name and Address of New Registered Agent
81 Name: McMillan, James M.
82 Street Address (P.O. Box Number is Not Acceptable): 6848 S.W. 37th Street
83
84 City: MIRAMAR FL 85 Zip Code: 33023

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: James McMillan 8/5/96
Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating.

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	MCMILLAN, JAMES M	
STREET ADDRESS	610 NW 183RD ST.	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE	V	☐ DELETE
NAME	GALLIMORE-MCMILLAN , M	
STREET ADDRESS	610 NW 183RD ST.	
CITY-ST-ZIP	MIAMI FL 33169	
TITLE	D	☐ DELETE
NAME	DALEY, DAHLIA C	
STREET ADDRESS	6023 N. HILMAR CIRCLE	
CITY-ST-ZIP	FORESTVILLE MD 20747	
TITLE	D	☐ DELETE
NAME	SAMPSON, JEAN-MARIE	
STREET ADDRESS	2302 MONROE STREET N.E.	
CITY-ST-ZIP	WASHINGTON DC 20018	
TITLE	D	☐ DELETE
NAME	DALEY, STEWART	
STREET ADDRESS	6023 N. HILMAR CIRCLE	
CITY-ST-ZIP	FORESTVILLE FL 20747	
TITLE	D	☐ DELETE
NAME	SAMPSON, CHARLON	
STREET ADDRESS	2302 MONROE STREET N.E.	
CITY-ST-ZIP	WASHINGTON DC 20018	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	☑ Change ☐ Addition
1.2 NAME	JAMES M. MCMILLAN	
1.3 STREET ADDRESS	6848 S.W. 37 STREET	
1.4 CITY-ST-ZIP	Miramar, FL 33023	
2.1 TITLE	VICE-PRESIDENT	☑ Change ☐ Addition
2.2 NAME	MARVA GALLIMORE-MCMILLAN	
2.3 STREET ADDRESS	6848 S.W. 37th STREET	
2.4 CITY-ST-ZIP	Miramar, FL. 33023	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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)(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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James McMillan JAMES MCMILLAN 8/5/96 (954) 987-1083
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)