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 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000050028 (7)

1. Corporation Name
THE FLORIDA WOMENS SHOW OF LEE AND COLLIER COUNTY, FLORIDA, INC.

Principal Place of Business
~~4915 DANA DRIVE,~~
~~FORT MYERS FL 33907~~
1332 28 Ave S.W.
Deerfield Bch FL 33442

Mailing Address
~~4915 DANA DRIVE,~~
~~FORT MYERS FL 33907~~ 1332 S.W. 28th Ave Deerfield Bch FL 33442

3. Date Incorporated or Qualified: 07/01/1994
3a. Date of Last Report:

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

4. FEI Number: 65-0500396 — 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
HARRIS, EDWIN B JR
~~4915 DANA DRIVE~~ 1332 S.W. 28th Ave
~~FORT MYERS FL 33907~~ Deerfield Beach, FL 33442

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City — FL — B5 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 (attest or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	~~PRES~~
NAME	HARRIS, EDWIN B JR.
STREET ADDRESS	1915 DANA DRIVE
CITY ST ZIP	FORT MYERS FL 33907
TITLE	Joanne Harris ~~Secretary~~
NAME	
STREET ADDRESS	1915 Dana Drive
CITY ST ZIP	Ft Myers, FL 33907
TITLE	VP
NAME	Theresa Sistermann
STREET ADDRESS	1915 Dana Dr
CITY ST ZIP	Ft Myers, FL 33907
TITLE	PRES
NAME	Edwin B. Harris Jr
STREET ADDRESS	1332 S.W. 28th Ave
CITY ST ZIP	Deerfield Beach, FL 33442
TITLE	
NAME	
STREET ADDRESS	5/1/95 MS
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	000001483040
1.3 STREET ADDRESS	-05/10/95--01094--012
1.4 CITY ST ZIP	****208.75 ****208.75
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
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: Edwin B Harris — 3-30-95 — 305-419-9791
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0321006 CP