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 11 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000052367 (7)

1. Corporation Name
M3C, INC.

Principal Place of Business	Mailing Address
1460 CHUKAR RIDGE PALM HARBOR FL 34683	1460 CHUKAR RIDGE PALM HARBOR FL 34683

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/14/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 1450 Madruga Avenue	26
Suite, Apt. # etc. 22 Suite 305	Suite, Apt. # etc. 27
City & State 23 Coral Gables, Florida	City & State 28
Zip 24 33146 — Country 25 U.S.A.	Zip 29 — Country 30

4. FEI Number — [X] 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 [X] No

9. Name and Address of Current Registered Agent

ROCHA, VICTOR E ESQ
1450 MADRUGA AVE
SUITE 305
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

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] — 5-8-95
(REGISTERED AGENT SIGNATURE) — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1 TITLE	D — [XX] Change [ ] Addition
NAME	HOUSE, JOHN M	1 NAME	VICTOR E. ROCHA
STREET ADDRESS	800 W ARBROOK #330	1 STREET ADDRESS	1450 Madruga Avenue, Ste. 305
CITY-ST-ZIP	ARLINGTON TX 76015	1 CITY-ST-ZIP	Coral Gables, Florida 33146
TITLE		2 TITLE	[ ] Change [ ] Addition
NAME		2 NAME	
STREET ADDRESS		2 STREET ADDRESS	
CITY-ST-ZIP		2 CITY-ST-ZIP	
TITLE		3 TITLE	[ ] Change [ ] Addition
NAME		3 NAME	
STREET ADDRESS		3 STREET ADDRESS	
CITY-ST-ZIP		3 CITY-ST-ZIP	
TITLE		4 TITLE	[ ] Change [ ] Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	[ ] Change [ ] Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	[ ] Change [ ] Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 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: [signature] — 5-8-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0344496 CP

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1995

DOCUMENT # **P94000052376 (8)**

MAIN EVENTS ENTERTAINMENT, INC.

407 Lincoln RD 2B
Miami Beach FLA 33139

407 Lincoln RD 2B
Miami Beach FLA 33139

07/11/1994

21 407 Lincoln Rd
22 2B
23 Miami Beach, FLA
24 33139 25 Dade

26 Same
27 Same
28 Same
29 Same 30

9. Name and Address of Current Registered Agent

PARDO, ALEXANDRINA
5825 COLLINS AVE.
APT. 10G
MIAMI BEACH FL 33140

10. Name and Address of New Registered Agent

81 Nelan Sweet Trustee
82 4601 N. Bay Rd.
83 Miami Beach, Florida
84 FL 85 33140

11. Pursuant to the provisions of Section 607.0501 and 607.1505, 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. The corporation is qualified to do business. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

Nelan Sweet, Trustee 4-28-95

12. Officer, Director

D/VP
Nelan Sweet
4601 N. Bay Road
Miami Beach, FL 33140
President
Alexandrina Pardo
5825 Collins Avenue, #10G
Miami Beach, Florida 33140

13. Addition, Change and Deletion

14. I know that the information supplied above to be filed, including any attachments, is true and accurate and that my signature below is in accordance with the applicable provisions of the Florida Statutes. I am aware that any false information submitted in a document to be filed may subject me to penalty of perjury.

SIGNATURE: Nelan Sweet, Trustee V.P. 4-29-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0079494 CP