FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

16701 COLINS AVE.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

CITY: ST-ZIP

appears in Block 12 or Block 13 if changed, or on an attachment with an address.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400068349 (7)

SPACE FOR ENTERTAINMENT CORP.

18701 COLINS AVE. MIAMI BEACH FL 33160-4201 MIAMI BEACH FL 33160 3. Date Incorporated or Qualified 3a. Date of Last Report 09/12/1994 04/15/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0530905 Not Applicable 21 26 Suite Ant # etc. **\$8.75** Additional Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Country Zio Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Я1 Name FREEDMAN & MCCLOSKY, P.A. ONE EAST BROWARD BLVD., SUITE 700 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33301 83 84 Zip Code City 85 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. Lam farmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and thir if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. DELETE Change DPS 1.1 TITLE TITLE WINTERS, LAUREN 1.2 NAME NAME 16701 COLINS AVE. 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33160 1.4 CITY - ST - ZIP CITY-ST-ZIF ☐ Change Addition DELETE 2.1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-7/2 Addition Change DELETE 31 TITLE THLE 3.2 NAME NAME 3 3 STREET ADORESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY - ST - ZIF Change ___ Addition DELETE 4.1 TITLE THILE NAM-4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP C-TY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP C-TY - ST- ZIP DELETE Change Addition 61 TITLE TIPLE 6.2 NAME NAME 6.3 STREET ADDRESS SUBJECT ADORESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information and cated on this annual report or suppliemental 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

FILED Feb 14 1997 8:00am Secretary of State

