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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 20 1998 8:00am Secretary of State

DOCUMENT # P9500001619 (2) LLOYD BURKLEY PRODUCTIONS, INC. Principal Place of Business Mailing Address 7211 10TH ST. 80UTH 7211 10TH ST. SOUTH ST. PETERSBURG FL 33705 ST. PETERSBURG FL 33705 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/06/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 1000 FRIENDLY WAY 59-3298583 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Zio 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No 29 30 Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 SEGAL, MARTIN E. PA 2655 LEJEUNE RD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1101** 83 **CORAL GABLES FL** 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE Change __ Addition TITLE BURKLEY, H. LLOYD 1.2 NAME NAME 7211 10TH ST. SOUTH STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33705 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZiP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST-ZIP CITY-ST-ZIP

14. I 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 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 it changed to on an attachment with phaddees.