

1201 BAY STREET  
TALLAHASSEE, FL 32301

800-342-8086

# P95000022339



03/20/95 11:25

REGISTRATION CONFIRMATION

ACCOUNT NO. : 0721000000032

REFERENCE : 562735 0343A

AUTHORIZATION : *Patricia Nye*

COST LIMIT : 970.00

ORDER DATE : March 20, 1995

ORDER TIME : 10:57 AM

ORDER NO. : 562735

CUSTOMER NO: 0343A

CUSTOMER: Benjamin Schiff, Esq  
BENJAMIN SCHIFF, ESQ

950000014-00000000

490 S.w. 101st Terrace  
Plantation, FL 33324

DOMESTIC FILING

## P95000022339

NAME: WORLDWIDE GAMES, INC.

XX ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carol M. Hensel

EXAMINER'S INITIALS:

*Dm*  
3-20-95  
01

FILED  
95 MAR 20 PM 2 00  
SEC. OF STATE  
TALLAHASSEE, FL

ARTICLES OF INCORPORATION  
OF  
WORLDWIDE GAMES, INC.

FILED  
95 MAR 20 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned incorporator hereby forms a corporation under Chapter 607 of the laws of the State of Florida.

ARTICLE I. NAME

The name of the corporation shall be:  
WORLDWIDE GAMES, INC.

The address of the principal office of this corporation shall be 490 Southwest 101 Terrace, Plantation, Florida 33324, and the mailing address of the corporation shall be the same.

ARTICLE II. NATURE OF BUSINESS

This corporation may engage or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory or nation.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is 10,000 shares of common stock having \$.10 par value per share.

ARTICLE IV. REGISTERED AGENT

The street address of the initial registered office of the corporation shall be 1201 Hays Street, Tallahassee, Florida 32301, and the name of the initial registered agent of the corporation at that address is Corporation Information Services, Inc.

ARTICLE V. TERM OF EXISTENCE

This corporation is to exist perpetually.

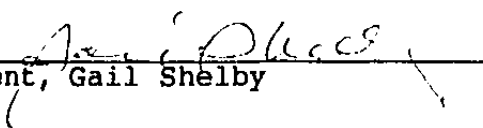
ARTICLE VI. INCORPORATOR

The name and street address of the incorporator to these Articles of Incorporation:

Corporation Information Services, Inc.  
1201 Hays Street  
Tallahassee, Florida 32301

IN WITNESS WHEREOF, the undersigned agent of Corporation Information Services, Inc., has hereunto set their hand and seal of Corporation Information Services, Inc., on March 20, 1995.

CORPORATION INFORMATION SERVICES, INC.

By:   
Its Agent, Gail Shelby

FILED  
95 MAR 20 11 2 AM  
TALLAHASSEE

ACCEPTANCE OF REGISTERED AGENT DESIGNATED  
IN ARTICLES OF INCORPORATION

Corporation Information Services, Inc., a Florida corporation authorized to transact business in this State, having a business office identical with the registered office of the corporation named above, and having been designated as the Registered Agent in the above and foregoing Articles, is familiar with and accepts the obligations of the position of Registered Agent under Section 607.0505, Florida Statutes.

CORPORATION INFORMATION SERVICES, INC.

By: *Gail Shelby*

Its Agent, Gail Shelby

GLS/cmh

# P95000022339

\_\_\_\_\_  
(Manufacturer's Name)  
 \_\_\_\_\_  
**BENJAMIN SCHIFF**  
 Attorney At Law  
 \_\_\_\_\_  
 490 SOUTHWEST 101st TERRACE  
 \_\_\_\_\_  
 PLANTATION, FLORIDA 33324  
(City, State, Zip)

500001447495  
 -04/05/95--01006--012  
 \*\*\*\*\*70.00 \*\*\*\*\*35.00

OFFICE USE ONLY

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in   
  Pick up time \_\_\_\_\_   
  Certified Copy  
 Mail out   
  Will wait   
  Photocopy   
  Certificate of Status

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 95 APR -3 AM 8:41  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

4/

Examiner's Initials	JB
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Charter No P 95000022339

Date Filed MARCH 30, 1995

### STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the under-  
signed corporation, organized under the laws of the State of Florida, submits the following statement for  
the purpose of changing its registered office and registered agent in the State of Florida.

1. The name of the corporation is: LAZARD FRIDOL GAMLI, INC.

2. The name and address of its present registered agent is:

CORPORATION INFORMATION SERVICES, INC.  
1201 Hays Street  
Tallahassee, Florida 32301

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TALLAHASSEE FLORIDA

3. The name and street address to which its registered agent is to be changed is:  
(P.O. BOX NOT ACCEPTABLE)

BENJAMIN SCHIFF  
490 SW 101 TERRACE  
PLANTATION, FL 33324

4. The street address of its registered office and the street address of the business office of its registered  
agent, as changed, are identical.

5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of  
the corporation so authorized by the board of directors.

BENJAMIN SCHIFF, PRESIDENT  
(Typed or printed name and title)

Signature [Signature]  
(President or Vice President)

Date 3/30/95

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE  
ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY  
ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR-  
THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER  
AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE  
OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA  
STATUTES.

Please Print/Type Name BENJAMIN SCHIFF

Signature [Signature]  
Agent

Date 3/30/95

P95000022339

BENJAMIN SCHIFF  
Certified Public Accountant  
490 S.W. 10th St. Suite 1000  
PLANTATION, FLORIDA 33324

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

- 1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
- 3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #) **600001875436**  
~~06/25/96--01142--005~~  
\*\*\*\*\*35.00 \*\*\*\*\*35.00
- 4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- Walk in
- Mail out
- Pick up time \_\_\_\_\_
- Will wait
- Certified Copy
- Photocopy
- Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
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<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

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<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 JUN 24 PM 2:30

JUN 28 1996

Examiner's Initials

\_\_\_\_\_

~~ARTICLES OF INCORPORATION OF~~  
**ARTICLES OF INCORPORATION OF**

WORLDWIDE GAMES, INC.

Pursuant to the provisions of Chapter 607, Florida Statutes, the undersigned corporation adopts the following Articles Of Amendment to its Articles Of Incorporation filed MARCH 30 199 5 under Document Number 9500002339.

FIRST: The name of the corporation is hereby amended to:

HOMEROCK ENTERTAINMENT, INC.

SECOND: The aforesaid amendment(s) was/were adopted by the Board Of Directors on this 21ST day of JUNE, 1996 after a resolution of the proposed amendment was adopted by ~~unanimous consent of all shareholders or (the affirmative vote of the holders of a majority of the shares entitled to vote thereof sufficient for approval of the amendment)~~ on the 21ST day of JUNE, 1996.

Dated this 21th day of JUNE, 1996.

~~(Insert Corp Name)~~

By: [Signature]  
President or Vice President

Name: BENJAMIN SCHIFF

Attest:

[Signature]  
Secretary or Assistant Secretary

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
96 JUN 24 PM 2:30



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

96 NOV 18 AM 8:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000022339**

1. Corporation Name

**HOME ROCK ENTERTAINMENT, INC.**

Principal Place of Business

Mailing Address

480 S.W. 101 TERRACE  
PLANTATION FL 33324

480 S.W. 101 TERRACE  
PLANTATION FL 33324



If above addresses are incorrect in any way, use through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		7077 W. BROWARD BLVD		08/20/1995	
City & State		City & State		5. FEI Number	
PLANTATION		PLANTATION		65-0579496	
Zip		Country		Applied For	
33324		USA		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>					

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
VPT SEC	BENJAMIN SCHIFF	7077 W. BROWARD BLVD #230	PLANTATION, FL 33324
PRES	RICHARD A. REIZEN	^ ^ ^ ^	^ ^ ^
			100002010851--9 -11/21/96--01026--017 ***375.00 ***375.00

**REINSTATEMENT 1996**  
*A. Alan*

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
SCHIFF, BENJAMIN 480 SW 101 TERRACE PLANTATION FL 33324		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State <b>FL</b> Zip Code	

10. I am appointing the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: *[Signature]* Date: 11/11/96

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No  (See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: *[Signature]* BENJAMIN SCHIFF 11/11/96 954-474-3252

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #