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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000064752 (5)

CASINO ART, INC.

Principal Place of Business

Mailing Address

% KLUGER, PERETZ, KAPLAN & BERLIN, P.A. 1970 MAMI CENTER, 201 S. BISCAYNE BLVD. MIAMI FL 33131 % KLUGER. PERETZ. KAPLAN & BERLIN. P.A. 1970 MIAMI CENTER, 201 S. BISCAYNE BLVD. MIAMI FL 33131 FILED
May 04 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/22/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0609347 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 760 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zin Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HALPERIN, RONNY J ESQ Miami Center Registered Agents, Inc. 201 SOUTH BISCAYNE BLVD. 201 South Biscayne Boulevard 1970 MIAMI CENTER **Suite 1700 MIAM! FL 33131** Miami, Florida 33131 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 poth, 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. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change Addition 1.1 Title LEVY, ADAM H NAME 1.2 NAME 201 S. BISCAYNE BLVD., SUITE 1970 STREET ADORESS 1.3 STREET ADDRESS MIAMI FL 33131 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-29F 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE ☐ Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 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 of 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 attach ment with an address.

SIGNATURE:

4/27/98 954-521-2444