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

P95000080943 (0) DOCUMENT

Principal Place of Business	Mailing Address	
1300 8 SUMMERLIN AVE ORLANDO FL 32806 US	P O BOX 3125 ORLANDO FL 32802 US	

FILED May 18 1998 8:00am Secretary of State

MAJABU NEW WORLD MEDIA, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/17/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-3340698 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent CHMIELARRSKI, MARK S. **5333 VERSAILLES DRIVE** Street Address (P.O. Box Number is Not Acceptable) SUITE 100 83 **MAITLAND FL 32751** 84 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 registricid agent and title if applicable (NOTE: Registered Agent signalure required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETÉ 1.1 THU Change **BURKE, MARITZA** NAME 1.2 NAME CR2E034 122 NORTH ORANGE AVENUE, SUITE A-STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 1.4 CITY - S1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **BURKE, JAMES J R** NAME 2.2 NAME 1300 south Sunnerlin Ave 122 NORTH ORANGE AVENUE, SUITE A STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL 33806 ORLANDO FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAMI STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 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 Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - S1 - 7iP CITY-ST-7IP

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 if changed or on an attrichment with an address