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

PROFIT CORPORATION ANNUAL REPORT

1997

I am an officer or director of the appears in Block 12 or Block 12



FLORIDA DEPARTMENT OF STATE

FILED

May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000011497 (0)

TAVDASH ENTERTAINMENT, INC. Principal Place of Business Mailing Address 1172 S. DIXIE HIGHWAY 1172 S. DIXIE HIGHWAY **SUITE 436** SUITE 436 CORAL GABLES FL 33146 **CORAL GABLES FL 33146-2918** 3. Date Incorporated or Qualified 3a. Date of Last Report 02/06/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 \$8.75 Additional Suite, Apt #, etc Suite, Apt. #, etc. 5, Certificate of Status Desired Fee Required 22 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 28 Added to Fees Trust Fund Contribution Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 29 30 Yes No 24 25 Florida Statutes 9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent NUNEZ, ALEJANDRO ESQ. 6361 SUNSET DRIVE 82 **CORAL GABLES FL 33143** 83 84 7in Code 33134 7.0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Se this statement for the purpose of changing its registered office or registered agent, or bo SIGNATURE gent and lifte if applicable (NOTE: Registored Agen; signature required when reinstating) 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96 60 PSTD Change Addition DELETE TITLE 11 TITLE WAN, SUELAN NAME 1.2 NAME 1172 S. DIXIE HIGHWAY #436 STREET ADDRESS 1.3 STREET ADDRESS CORAL GABLES FL CITY-ST-ZIP 1.4 CITY - S1 - ZIP DELETE Change TITLE 2.1 TAILE Vice-NAME 2.2 NAME ROBERT STREET ADDRESS 2.3 STREET ADDRESS 2 4 CHY-\$1-7IF CITY-ST-ZIE DELETE TITLE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - 2IP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY-ST-ZIP of with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the applemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I do hereby certify that the information indicated on this annual

DI CHIBBLE

the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name on an attachment with an address.