

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

FILED  
May 11 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000025390 (1)

1. Corporation Name

HOW HIGH ENTERTAINMENT, INC.

Principal Place of Business

1500 NW 12TH AVE., STE. 1327  
MIAMI FL 33136

Mailing Address

P O BOX 472515  
MIAMI FL 33247-2515  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/18/1996

4. FEI Number

65-0667861

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

WEECH, K. STEPHEON  
1500 NW 12TH AVE., STE. 1327  
MIAMI FL 33136

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

*Stephen Weech*

4/30/98

Signature typed or printed name of registered agent and title if applicable

Signature typed or printed name of registered agent and title if applicable

DATE

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP	<input type="checkbox"/> DELETE
NAME	WEECH, K. STEPHEON	
STREET ADDRESS	1500 NW 12TH AVE., STE. 1327	
CITY-ST-ZIP	MIAMI FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WEECH, K. STEPHEON	
1.3 STREET ADDRESS	1500 NW 12th Ave. STE 1327	
1.4 CITY-ST-ZIP	Miami, FL 33136	
2.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	WEECH, GEORGETTE	
2.3 STREET ADDRESS	412 NW 47th Street	
2.4 CITY-ST-ZIP	Miami, FL 33127	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 if changed or on an attachment with an address.

SIGNATURE:

*Stephen Weech*

4/30/98

751-6980

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