2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 30, 2005 08:00 AM Secretary of State DOCUMENT # P96000051320 1. Entity Name JS STADIUM, INC. Mailing Address Principal Place of Business ROGER DEAN STADIUM, 4751 MAIN STREET P 0 BOX 8978 4751 MAIN STREET JUPITER, FL 33468 IJS JUPITER, FL 33458 03222005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0699118 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstalling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME SAMSON, DAVID STREET ADDRESS % FLORIDA MARLINS, 2267 DAN MARINO BLVD U00000280455 OPA LOCKA, FL 33056 CITY-ST-ZIP 03/30/05-80022-006 150.00 TITLE DE WITT, WILLIAM III NAME 250 STADIUM PLAZA STREET ADDRESS CITY-ST-ZIP SAINT LOUIS, MO 63102 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(\$)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 9

NAME STREET ADDRESS CITY-ST-ZIP

Daytime Phone #