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

DOCUMENT # P96000054955 (5)

DUR UNITED ENTERTAINMENT CORPORATION

FILED Apr 24 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					
2200 N FLORIDA MANGO 2ND FLOOR	Ü	2200 N FLORIDA MANGO 2ND FLOOR			
WEST PALM BEACH FL 33409		WEST PALM BEACH FL 33409			
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified 06/26/1996
2. Principal Place of Business	2a. Mailing Address	26			4. FEI Number Applied For
21	26				65-0709106 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27		э.			5. Certificate of Status Desired See Required Fee Required
City & State	City & State	· · · · · · · · · · · · · · · · · · ·			6. Election Campaign Financing \$5.00 May Be
23 28					Trust Fund Contribution
Zip Country	Ζψ	Co	untry		8. This corporation owes or has paid the current year Intangible
24 25	29	30			Personal Property Tax due June 30. Yes No
Name and Address of Curr	ent Registered Agent		<u> </u>		10. Name and Address of New Registered Agent
SLAVIN, MICHAEL Á			81	Name	
4440 PGA BLVD SUITE 402 Palm Beach Gardens Fl 33410		82	Stroot	Address (P.O. Box Number is Not Acceptable)	
			"-	Oligot	Address (1.0. box (40/11bo) to 140/ Acceptable)
	.•		83		
				0''	
			84	City	FL 85 Zip Code
11, Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	ites, the a	above	e-named	
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 this State of Florida Stuch 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 registered in			ed Age	nt signature	required when reinstating) DATE
	ND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE P	☐ DECEIE		TITLE		,
METOR DALLAS DE ACULEI, DO 400				1016 No. Divio H.W. Ste 1	
					l l'
CITY-ST-ZIP WEST PALM BEACH FL 33			CITY-S	T-ZIP	West Palm Beach, FL 33401
TIFLE	☐ DELETE	2.1 T			Change L Addition ST
NAME			NAME		Bielski, Karen
STREET ADDRESS				ADDRESS	_ ·
CITY-ST-ZIP		2. 4 CITY-			1016 No. Dixie Hwy, Ste 1
TITLE	☐ DELETE	3.1 T		W	est Palm Beach, FI. 33401 Change Addition
NAME		3.21	NAME		
STREET ADDRESS		3.3 9	STREET	ADDRESS	
CITY-ST-ZIP			CITY-S	T-71P	
TITLE	☐ DELETE	4.1.1			☐ Change ☐ Addition
NAME		4.2	NAME		
STREET ADDRESS		4.3 9	STREET	AODRESS	
CITY-S1-ZIP		4.4 (HY-S	T - ZIP	
TITLE	☐ DELETE	5.1 1	ITLE		Change Addition
NAME		5.2 h	NAME		
STREET ADDRESS		5.3 9	STREET	address	
CITY-ST-ZIP		5.4 0	CITY-S	T-21P	
TITLE	☐ DFLET E	6.1 T	ITLE		☐ Change ☐ Addition
NAME .		6.2 h	IAME		
STREET ADDRESS		6.3 9	STREET	ADDRESS	
CITY-ST-ZIP		6.4 0	CITY-S	T-ZIP	
	with this filing does not qualify				ed in Section 119.07(3)(i). Florida Statutes. I further certify that the information

4. 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 or the sides 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.

CICALATURE.