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Apr 30, 1999 8:00 am  
Secretary of State

04-30-1999 90177 045 \*\*\*163.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000058891

1. Corporation Name

ADC ENTERTAINMENT, INC.

Principal Place of Business

3601 NE 207TH ST  
#1214  
AVENTURA FL 33180  
US

Mailing Address

POST OFFICE BOX 801536  
AVENTURA FL 33280-1536

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/11/1996

4. FEI Number

65-0689418

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☒

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 6216 Raleigh St

2a. Mailing Address

26 P.O. BOX 618121

Suite, Apt. #, etc.

22 714

Suite, Apt. #, etc.

27

City & State

23 Orlando, FL.

City & State

28 Orlando, FL.

Zip

24 32835

Country

25 USA

Zip

29 32861

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

KENNETH M. KALEEL PA  
555 NO. CONGRESS AVENUE STE 302  
BOYNTON BEACH FL 33426

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST ☐ DELETE

NAME DAGENAIS, ARMANDE  
STREET ADDRESS 3601 NE 207TH ST  
CITY-ST-ZIP AVENTURA FL 33180

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVST ☒ Change ☐ Addition

1.2 NAME DAGENAIS, ARMANDE  
1.3 STREET ADDRESS 6216 Raleigh St. #714  
1.4 CITY-ST-ZIP Orlando, FL. 32835

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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, with all other like empowered.

SIGNATURE:

Armande Dagenais

April 26, 99 407.297.6690

Date

Daytime Phone #

CR2E034 (11/98)