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

PROFIT CORPORATION annual report

1997

STREET ADDRESS

SIGNATURE:

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FLORIDA DEPARTMENT OF STATE

FILED

May 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P96000069540 (8)

HOLIDAY PUBLICATIONS WORLDWIDE, INC.

Principal Place of Business Mailing Address 4360 PETERS RD 4360 PETERS RD FT LAUDERDALE FL 33317 FT LAUDERDALE FL 33317-4543 3. Date Incorporated or Qualified 3a. Date of Last Report 08/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 25-069075 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zio 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name , venis, harry 2455 E SUNRISE BLVD, PENTHOUSE NORTH Street Address (P.O. Box Number is Not Acceptable) . FT LAUDERDALE FL 33304 83 Zio 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13, Change Addition DELETE 1.1 TITLE TITLE VENIS. HARRY NAME 1.2 NAME 2455 E SUNRISE BLVD. PENTHOUSE NORTH STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33304 1.4 CITY-ST-ZIP CITY-ST-7IF Change DELETE Addition 2.1 TITLE TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP 0/17-51 DELETE Change Addition TII,F 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHTY - ST - ZIF DELETE Change Addition THLE 41 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CHY+SI-ZIP DELETE 5.1 TITLE ☐ Add/tion THLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-7P DELETE Change Addition 6.1 TITLE 1111 6.2 NAME NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZiP 14. If do 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 ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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