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Apr 29 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 # P96000078336 (0)

1. Corporation Name

EXPOSITION PRESS INTERNATIONAL CORP.

Principal Place of Business
~~210 UNIVERSITY DR., SUITE 208~~
~~POMPAHO BEACH FL 33064~~
210 UNIVERSITY DR., SUITE 208
CORAL SPRINGS, FL 33071

Mailing Address

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

g. Name and Address of Current Registered Agent

~~MALLIK, A. KARIM DR.~~
~~317 N.W. 43RD PL.~~
~~101~~
~~POMPAHO BEACH FL 33064~~

Resigned

81 Name

PANCHULA, LESLIE B. DR.

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

210 UNIVERSITY DR.

83

Suite 208

84 City

CORAL SPRINGS, FL

85 Zip Code

33071

10. Name and Address of New Registered Agent

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 Dr. Leslie B. Panchula, (DR. LESLIE B. PANCHULA)

4-8-98

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME PTD
PANCHULA, LESLIE B. DR.
STREET ADDRESS 317 NORTHWEST 43 PLACE, SUITE 101
CITY-ST-ZIP POMPAHO BEACH FL 33064

TITLE ☒ DELETE

NAME ~~VSD~~
~~MALLIK, A. KARIM DR.~~
STREET ADDRESS 317 NORTHWEST 43 PLACE, SUITE 101
CITY-ST-ZIP POMPAHO BEACH FL 33064

TITLE ☐ DELETE

NAME D
PANCHULA, PAUL N
STREET ADDRESS 4811 N.W. 1ST AV.
CITY-ST-ZIP POMPAHO BEACH FL 33064

TITLE ☐ DELETE

NAME D
MARKS, DAVID R
STREET ADDRESS 2575 S.E. NINTH ST.
CITY-ST-ZIP POMPAHO BEACH FL 33062

TITLE ☐ DELETE

NAME D
ESCHAVES, MATIAS E
STREET ADDRESS 4417 MARS AV.
CITY-ST-ZIP WEST PALM BEACH FL 33406

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

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.

SIGNATURE: Dr. Leslie B. Panchula

4-8-98 954-751-9330

CR2E034 (10/97)