SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 97 SEP 26 MI 8: 50 DOCUMENT # P96000086321 (2) LTR ENTERTAINMENT CORPORATION Principal Place of Business Mailing Address 8826 US HIGHWAY NORTH 8826 US HIGHWAY NORTH PORT RICHEY FL 34668 PORT RICHEY FL 34668 3a. Date of Last Report 10/17/1996 2a. Mailing Address 2. Principal Place of Business 19 Applied For 59-3410491 NORTH 1701 Mariner Way Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired PATPERS STATES Fee Required 22 City & State \$5.00 May Be Election Campaign Financing PALM HARBOR Trust Fund Contribution Added to Fees 34684-1033 25 PINEU AS 34489.5852 30 X Yes Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent Name and Address of New Registered Agent GONZALES, LARRY J Name 6645 RIDGE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PORT RICHEY FL 34868 83 84 City 85 Zip Code FL 11. Pursuant to the provisions of Soctions 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 a copylithe obligations of, Section 607.0505, Florida Statutes. SIGNATURE tered agout and title 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 ROBERTSON, LEX T SR 1.2 NAME NAME 8826 US HIGHWAY NORTH 1.3 STREET ADDRESS 5000023092**15--**-1001/97-01101-011 STREET ADDRESS PORT RICHEY FL 34668 CITY-ST-ZIP 14 CITY - ST - ZIP DELETE \*\*\*\*750,00 \*\*\*\*750.00ion 2.1 TILE TITLE ROBERTSON, JOYCE 22 NAME NAME 8826 US HIGHWAY NORTH 2 3 STREET ADDRESS STREET ADDRESS PORT RICHEY FL 34668 CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition 31 TITLE TITLE ROBERTSON, LEX T JR NAME 3.2 NAME 8826 US HIGHWAY NORTH 3 3 STREET ADDRESS STREET ADDRESS **PORT RICHEY FL 34668** 34. CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE Change TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE WILE 5.1 10 LE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City - St - ZiP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS

6.4 CiTY-ST-ZIP I 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 by the receiver of trustee ompowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if charged on an exact prior by the name of the corporation.

0/0/-/813)937-3333

14. I do hereby certify that t