SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998 AND WILL BE DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 DEC ! | PM 3: 49 P97000007362 OCUMENT # SECRETARY OF STATE TALLAHASSEE, FLORIDA The Sci-Fi Megaplex, Inc.  $^-$ (fka The Original Sci-Fi Cafe & Emporium Inc. Principal Place of Business . 1830 W. BROWARD BLUD. Fort Lauderdale, FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/21/97 2. Principal Place of Business 2a. Mailing Address 4 FÉL Number Applied For Suite Apr # etc. D. BROWARD BLUD SAME 21 65-0736875 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & Stale City & State \$5.00 May Be 6. Election Campaign Financing  $\Box$ Trust Fund Contribution 28 Added to Fees Lauderdale Žio Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Ų\_Yes ☐ No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Richard P. Greene S. Delanasako Barnufijaranake dalah 2455 East Sunrise Blvd, Suite 1038 1830 W. BROWARD BLUD Fort Lauderdale, FL 33304 Zip Code fort Lauderdale <u> 3331</u>2 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. 11/4/98 SIGNATURE northeboralmanAmunGronsbell ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ST DELETE TITLE 1.1 TITLE Change Addition CEO Glenn K. Jackson CEO 12 NAME NAME Mark Williams STREET ADDRESS 1.3 STREET ADDRESS 1830 W. BROWARD BLUD 1132 SE 2nd Avenue CITY-ST-ZIP 1.4 CITY-ST-ZIP Lauderdale, FL Ft. Lauderdale, FL 333 betere 2.1 TITLE TITLE President 2.2 NAME NAME Raymond J. Talarico STREET ADDRESS 2.3 STREET ADDRESS 1830 W. BROWARD BLUD CITY-ST-ZIP 2. 4 CITY-ST-ZIP Ft. Lauderdale, FL <del>33</del>312. DELETE 317016 TITLE Vice-President NAME 3 2 NAME STATET ADDRESS 3.3 STREET ADDRESS Glenn K. Jackson 3 4. CITY - ST-ZIP CITY-ST-ZIP DELETE Secretary00002713775 4449 Glenn K. Jack**\*2**015/98--01103--011 TIŢLE 4.1 TITLE NÂME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS \*\*\*\*122.50 \*\*\*\*\*61.25 ... 44 CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ DELETE 5.1 TITLE Change Addition Treasurer NAME Glenn K. Jacson 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS. 6.4 CITY-ST-ZIP 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 the annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as immade under oath; that I am an officer or director of the corporation or interfective or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an address.

AINTED NAME OF SKING OFFICER ON DIRECTOR LATICO

-- 11/4/98-

954-769-9100

SIGNATURE:

(2/98)