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

PROFIT
CORPORATION
ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000019828 (7)

MARC ANTONY PRODUCTIONS, INC.

Principal Place of Business Mailing Address 250 AUSTRALIAN AVE. SOUTH 250 AUSTRALIAN AVE. SOUTH Suite 1601 **SUITE 1601** west palm beach fl 33401 WEST PALM BEACH FL 33401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/04/1997 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0740674 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zlp Country Country $Z_{\mathbb{P}}$ 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DAVIS, RICHARD T 250 AUSTRALIAN AVE. SOUTH 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1601** 83 **WEST PALM BEACH FL 33401** 84 City 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 run e of regelicied agent and title if applicable (NCTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. X DELETE President TITLE Change X Addition 11 TILLE MORTON, JAMES A Mark Haller NAME 1.2 NAME 250 AUSTRALIAN AVE. SOUTH SUITE 1601 STREET ADDRESS 1.3 STREET ADDRESS Gordon Drive WEST PALM BEACH FL 33401 CITY-ST-ZIP 1.4 CITY - ST - ZIP Naples, FL 34102 DELETE X Addition TITLE 2.1 TITLE Change Treasurer NAME 2.2 NAME Anthony J. Bolland STREET ADDRESS 2.3 STREET ADDRESS 21 Custom House Street CITY-ST-ZIP 2. 4 CITY - ST - ZIP Boston, MA 02110 DELETE TITLE 3.1 TITLE __ Change Addition **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME

14. Thereby 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

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

5.4 CiTY-ST-ZiP

61 TITLE

62 NAME

DELETÉ

a. The A Bolland .

CR2E034 (10/97)

Change

4 20 68

Addition

FILED

May 13 1998 8:00am

Secretary of State