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

FILED PROFIT Apr 27 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P97000025677 (0) DOCUMENT # CARTOON EXPRESS, INC. Principal Place of Business Mailing Address 750 SW 174TH TERR 750 SW 174TH TERR. PEMBROKE PINES FL 33029 PEMBROKE PINES FL 33029 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/21/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0737129 21 10862 NW 27th STREET Not Applicable 10862 NW 27th Street Suite, Apt. #. etc. Suite. Apt. #. etc. \$8.75 Additional Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be IMAIM FLORIDA MIAMI Trust Fund Contribution Added to Fees FLORIDA Country Country 8. This corporation owes or has paid the current year Intangible 33172 ☐ Yes □ No 25 Personal Property Tax due June 30. 29 33172 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SCORT, DIEGO 750 SW 174TH TERR. Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33029 83 84 Zip Code City AF. 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 name of registered agent and title d applicable (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 11 TITLE TITL F SCORT. DIEGO 1.2 NAME CR2E034 NAME 750 SW 174TH TERR. STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BIGIO, MARIA M 2.2 NAME NAME 750 SW 174TH TERR. 2.3 STREET ADDRESS STREET ADDRESS PEMBROKE PINES FL 33029 CITY-ST-ZIP 2.4 CITY - ST - ZIP ÖELETE Change Addition 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS**

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 accurate with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

City-St-ZiP

TITLE

NAME

MARIA M BIGIO

(305)4637800

Change

Addition