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 PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000057056

1. Corporation Name

FUN FAIR, U.S.A., INC.

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90123 014 ***150.00



Mailing Address Principal Place of Business 4310 SHERIDAN ST STE 202 4310 SHERIDAN ST STE 202 HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 06/27/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0766201 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State **\$5.00** May Be Election Campaign Financing П Added to Fees 28 Trust Fund Contribution 23 Country 8. This corporation owes the current year Intangible Country Zip Yes □ No Personal Property Tax. 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BURTON, ANDRE S Street Address (P.O. Box Number is Not Acceptable) 82 4310 SHERIDAN ST STE 202 HOLLYWOOD FL 33021 83 City 85 Zip Code 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 if applicable CR2E034 (11/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition DELETE 1.1 TITLE PTD TITLE VIVONA, SEBASTIAN 1.2 NAME NAME 7722 SW-169 TERR 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change ☐ Addition DELETE VSD 2.1 TITLE TITLE VIVONA, VALERIE 22 NAME NAME 7722 SW 169 TERR 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33157 2.4 CITY-ST-ZIP CITY-ST-ZIF Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition T DELETE Change 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE 62 NAME NAME 6.3 STREET ADDRESS 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 address, with all other like empowered

VALERILD

NG OFFICER OR DIRECTOR

64 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP