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

FILED PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Jun 03 1998 8:00 am Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **1998** DIVISION OF CORPORATIONS DOCUMENT # P97000101000 (2) CBTV INC. Principal Place of Business Mailing Address 2117 W. FAIRBANKS AVE. 2117 W. FAIRBANKS AVE. WINTER PARK FL 32789 WINTER PARK FL 32789 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/26/1997 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 5Ame 5 Ame Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible [] No 24 25 29 30 Personal Proporty Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MONCHER, MARK 2580 RIDGEWOOD AVE. #225 82 Street Address (P.O. Box Number is Not Acceptable) SANDFORD FL FL333-17 83 84 City Zip Code 85 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 160 in Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am tamping with, and accept the obligations of Section 607 0505, Florida Statutes. SIGNATURE (NOTE Registered Againt signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. Change Addition TITLE 11 1111.8 NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDINESS 14 CHY-ST-ZIP CITY - ST- ZIP Change Addition TITLE 21 THLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition TITLE 3 1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STHEET ADDRESS CHTY-ST-ZIP 3.4 CITY - S1 - ZIP TITLE DITTE 4.1 TITLE Change Addition 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY-S1-ZIP Change DELETE Addition TITLE 51 TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 is supplied with this filling 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 is supplied with this filling does not qualify for the exemption of the same legal effect as if made under oath; that I am an officer or director of the corporation or trustee appears in Block 12 or Block 13 if changed, of or published with an addition.

11-21-00

UDD 569,810