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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000104578 (4)

FAMILY ENTERTAINMENT CENTERS HOLDING COMPANY, IN

FILED Mar 16 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				1 18411441 468 18661 488	., 65:41 4411, 48:41 11611 64	III 4144 EIHI 144	
234 WILLARD STREET		234 WILLARD STREET					
COCOA FL 32922		COCOA FL 32922		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated o			
				12/11/1997			
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	3.0.0.0	□ Ap	plied For
21		26		59-	348 334	7. No	t Applicable
Suite, Apt.	₩, etc.	Suite, Apt. #, etc.		5. Certificate of Status	Desired	\$8.75	Additional
22		27		b, Certificate of Status		Fee Re	pquired
├─ ┐		City & State	& State		Financing	\$5.00	
23				Trust Fund Contribu		Added t	
Žιρ	Country	Zip	Country	8. This corporation owe	•		
24	25 9. Name and Address of Curre	29 30	0]	Personal Property Ta 10, Name and Address] No
DO.	ESCOTT, ALAN	ant riegiatered Agent	81 Name	10, Harris and Address	O HOW HOME	~Bour	
	4 WILLARD STREET						
	COA FL 32922		62 Street Add	ress (P.O. Box Number is N	ot Acceptable)		
, c	JUUN PL 32822		83				
			64 City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.05	on 2 and 607 1508 Florida Statutes	the above-named corr	poration submits this statem		t changing it	s registered
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat in familiar with, and accept the obli	te of Florida, Such change was aut	horized by the corporal	tion's board of directors. I h	ereby accept the ap	pointment as	registered
	in ramilar with, and accept the con-	gations of, abotion 607,0303, Front	da Siatutes.				
SIGNATURE	Signature, typed or printed have of registered as	gest and title diapplicable (NOTE F	Registered Agent signature requi	red when reinstating)	DATE		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGE	S TO OFFICERS AN	D DIRECTOR	S IN 12
TITLE	D	□ DELE¥E	1 1 TITLE			Change	Addition [
NAME	PRESCOTT, ALAN		1.2 NAME				
STREET ADDRESS	234 WILLARD STREET		13 STREET ADDRESS				li li
CHTY+ST-ZIP	COCOA FL 32922		1.4 City-St-ZiP	· · · · · · · · · · · · · · · · · · ·			
TITLE	D	DELETE	2 1 THLE			Change	Addition
NAME	PRESCOTT, SEAN		2 2 NAME	•			
STREET ADDRESS	234 WILLARD STREET		2 3 STREET ADDRESS				ļ
CITY-ST-ZIP	COCOA FL 32922		2 4 City+ST-ZiP			1 0	4400
TITLE		☐ DELETÉ	31 TITLE			Change	Addition
NAME			3 2 NAME				
STREET ADDRESS	<u>;</u>		3 3 STREET ADDRESS				
CITY-ST-ZIP	***************************************	DELETE	3 4. City+St-ZiP 4.1 Tijle	····		Change	Addition
TITLE		LJ DELLIE.				mai unango	_ Addition
NAME CTOTEX ADDRESS			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY+ST-ZIP TITLE		☐ DELETE	4 4 CITY-ST-ZIP 5 1 TITLE	 		Change	Addition
NAME		been	5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP				
	certify that the information supplied	with this filing does not qualify for t		Section 119.07(3)(i), Florida	a Statutes. I further c	ertify 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 empewered to could this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the corporation or the receiver or trustee of Block 12 or Block 13 if changed, or on an attachment with per-