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| CORPORATION ANNUAL REPORT | | Secretary of State DIVISION OF CORPORATIONS | | | THE DECKETARY OF STATE TVISION OF CORPORATION OF STATE STATE TVISION OF STATE | | |
| 1999 | | | | | | | |
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| Married Creater | folds Con |) | | | | ATHIN AND ANNOUNCED A | ************************************** |
| neigal Place of Business Mailing Address | | | | | 1101 • • | ····· | |
| XX N. PORT ROYALE DRIVE. SUITE 418 3300 N. PORT ROYALE DRIVE. SUITE 418 LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 | | | | 04-24 .44 - 90281 - 019 \$150.00 | | | |
| | | | | | 3. Date incorporated or Qualifed 06/19/1998 | <u> </u> | |
| Principal Place of Business | اآثا مسا | 2a. Mailing Address | | | 4. FEI Number 65-0838592 | → | Applicable |
| Sorte Apt # etc | F 1 | Suite, Apt. #, etc. | | | 5. Certifcate of Status Desired | \$8.75 A | |
| Dity & State | 27 | City & State | | | 6. Election Campaign Financing | \$5.00 i | · |
| Zip Count | 28 | Zip Country | | | Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible | | |
| Σιρ Country Zιρ 25 29 | | | 30 | | Personal Property Tax. | | □No |
| 9. Name and Addr | ess of Current Regist | ered Agent | | | 10. Name and Address of New Regist | ered Agent | |
| WILSON, JAMES | | | 81 | | (2) | | |
| 3300 N. PORT ROYALE DRIVE, SUITE 418 FT. LAUDERDALE FL 33308 | | | 82 | | | | |
| FI. LAUDERDALE PL 53 | 300 | | 83 | B] | | | |
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| office or registered agent, or bott agent. I am familiar with, and acc | ctions 607.0502 and 60 n, in the State of Fiorida cept the obligations of, | a Such change was au Section 607.0505, Flor | | | on's board of directors. I hereby accept the a | se of changing its appointment as reg | |
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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 1 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 path; 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 13 if changed, or on an attachment with an address, with all other like empowered.

61 TITLE

6.2 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

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10-20-99

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☐ Change ☐ Addition

Division of Corporations Annual report/reinstatement Section P.O. Box 6327 Tallahassee FL 32314

Attn: Michelle Milligan

Per our conversation on October 22, 1999, I am submitting this letter to reinstate the following companies. The annual Company dues have been paid and the corrected paperwork was filled out and sent back to the Division of Corporations. The following companies below paperwork was submitted after corrections were made. Per you request, I have filled out the new submitted paperwork for your review and approval/corrections. Thank you for your help and direction in correcting the issues related to these three companies.

Document #Company NameP98000055952Denise McConnell Inc.P98000055948Celebrity Mint Corp.P98000032629Married Centerfolds Corp.

I there are additional questions Please call 954-776-8013 Once again thank you for your help.

James Wilson