SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

FIFT **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris 90 JUL 20 PH 12: 44 AMNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS TAURETT E PLOTIDA DOCUMENT #

1. Corporation Name P98000044922 MAN COVER, INC. Principal Place of Business Mailing Address 04/08/99 90058 048 850 NE 13TH ST 850 NE 13TH ST FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304 DO NOT WRITE IN THIS SPACE \$ 150.00 05/18/1998 (4) FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0836273 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation owes the current year 24 25 29 30 Intangible Personal Property. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KENT, NORMAN ELLIOTT Street Address (P.O. Box Number is Not Acceptable) 800 E BROWARD BLVD, STE 310 FORT LAUDERDALE FL 33301 83 84 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 (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (5/99 OFFICERS AND DIRECTORS 12 13. TITLE 1.1 TITLE Change Addition DELETE POSSIEN, MARK NAME 1.2 NAME 850 NE 13TH ST STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL 33304 CITY-ST-ZIP 1.4 CITY-ST-ZIP 21 TITLE Change Addition TITLE DELETE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 31TITLE Change Addition 3.2 NAME NAME STREET ADDRESS 3 3 STREET ADORESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition 62 NAME NAME 6.3 STREET ADDRESS STREET ADORESS 6.4 CITY-ST-ZIP 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 attachment with an address.

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National MARKeting & Entertainment Group, Inc.



850 NE 13th Street Fort Lauderdale, FL 33304 **954-524-5050** fax 524-2288

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June 30, 1999

Florida Dept of State
Division of Corporate Filings
Annual Reports Filings
PO Box 1500
Tallahassee FL 32302-1500

RE: Resubmission of Annual Report Filings

Man Cover, Inc. and National Marketing & Entertainment Group, Inc.

Dear Sir or Madam:

On April 14, 1999, as advised according to Cathy at the Florida Dept. of State, a request for resubmission of the annual report filings for the above referenced corporations was mailed to our office.

The Accounting Manager at that time suffered a heart attack, was hospitalized and subsequently retired. I was hired while he was in the hospital. Apparently during this transition period the resubmission requests were misplaced and we have been unable to locate them.

In light of these extenuating circumstances, we respectfully request that the late charge for these filings be waived.

Very truly yours,

Craig Combs

Manager - Corporate Accounting

Cc: M. Possien - President

B. Grassing - General Manager