2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

May 03, 2004 8:00 am Secretary of State DOCUMENT # P98000085843 1. Entity Name 05-03-2004 90433 043 ***150.00 R&R ENTERTAINMENT GROUP, INC. Principal Place of Business Mailing Address 9130 STATE RD 84 9130 STATE RD 84 DAVIE FL 33324 DAVIE FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 65-0869986 Not Applicable Ζip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BARBER, RICHARD A Street Address (P.O. Box Number is Not Acceptable) 238 N. WESTMONTE DRIVE, #285 **ALTAMONTE SPRINGS FL 32714** City Zio Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be 9. Election Campaign Financing Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS STD ☐ Delete TITLE TITLE Addition RICCI, AGNES C NAME STREET ADDRESS 9130 STATE RD 84 STREET ADDRESS CITY-ST-ZIP DAVIE FL 33324 CITY-ST-ZIP VD ☐ Delete ☐ Change Addition TITLE RINDONE, MICHELE M NAME 3MAM STREET ADDRESS 9130 STATE RD 84 STREET ADDRESS CITY-ST-ZIP DAVIE FL 33324 CITY-ST-ZIE Change Addition TITLE PD ☐ Defete TITLE NAME RINDONE, RAYMOND NAME. STREET ADDRESS STREET ADDRESS 9130 STATE RD 84 CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33324 VD TITLE ☐ Change ☐ Addition TITLE Delete CANETTE, GARY NAME NAME 9130 STATE RD 84 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DAVIE FL 33324 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition BECKER, WERNER NAME 9130 STATE RD 84 STREET ADDRESS STREET ADDRESS DAVIE FL 33324 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition WAHL, WILLIAM NAME NAME 9130 STATE RD 84 STREET ADDRESS STREET ADDRESS DAVIE FL 33324 CITY-ST-ZIP CITY-ST-7IP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FILED