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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

ENTERTAINMENT EXCHANGE OF MIAMI, INC.

Principal Place of Business	Mailing Address
19371 SOUTH DIXIE HIGHWAY MIAMI FL 33157	19371 SOUTH DIXIE HIGHWAY MIAMI FL 33157

FILED May 11 1998 8:00am Secretary of State



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Principal Place of Business Mailing Address							
		19371 SOUTH DIXIE HIGH MIAMI FL 33157	1371 SOUTH DIXIE HIGHWAY IAMI FL 33157		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 10/23/1992		
2. Principa	al Place of Business	2a. Mailing Address			4. FEI Number	Applied F	-or
21		26			65-0396423	Not Appli	
	pt. #, etc	Suite, Apt. #, etc.				\$8.75 Addition	nal
22		27			or community of classes are control	Fee Required	
City & S	Stalo	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May B	
23		28	Country	4		Added to Fees	
Zip	Country	Zip		,	8. This corporation owes or has paid the	Yes No	Э
24	[25]		30		Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.		
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curr	ent Registered Agent	81	Name	10. Harrie and Address of Hew Register	ou Agent	
l	AMERILAWYER CHARTERED		1 61	Name			
	343 ALMERIA AVENUE		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
	CORAL GABLES FL 33134		83		#		
			84	City		85 Zip Code	
				· ·			
11. Pursua office agent	ant to the provisions of Sections 607.0 or registered agent, or both, in the Sta . I am familiar with, and accept the obl	502 and 607.1508, Florida Statuts de of Florida. Such change was a lgations of, Section 607.0505, Flo	es, the abov authorized b orida Statule	e-named cor y the corpora s.	poration submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registe appointment as registe	sted stered
SIGNATUR	Signature, typed or printed name of registered i	ngent and the if applicable (NOTE	Registered Ag	ent signature requ	uired when reinstaling) DA	·	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	PO	DELETE	1.1 TITLE			☐ Change ☐ A	Addition
NAME	BRAGA, ANTONIO		1.2 NAME				
STREET ADDRI	ISS 19371 SOUTH DIXIE HIGHW	VAY	1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33157		1.4 CITY -	ST-ZIP		,	
TITLE	VPSD	☐ DELETE	2.1 TITLE			☐ Change ☐ A	Addition
NAME	ELALOUF, RENE		2 2 NAME				
STREET ADDRI		VAY	2.3 STREE	T ADDRESS			
CITY-ST-ZIP	MIAMI FL 33157		2.4 CITY-				
TITLE		DELETE	31 TITLE	-		☐ Change ☐ A	Addition
NAME		_	3.2 NAME	1			
STREET ADDR	ree			T ADDRESS			
l			3.4. CITY-				
CITY-ST-ZIP		DELETE	41 TITLE	31-En		☐ Change ☐ A	Addition
NAME			4. 2 NAME				
STREET ADDR	199			T ADDRESS			
CITY-ST-ZIP		DELETE	4.4 CITY-	SI-ZIP	#	Change A	Addition
TITLE		□ ptrest	5.1 TITLE			C Almingo C A	Jane
NAME			5.2 NAME				
STREET ADDR	ESS			T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		Observation	Addition
TITLE	1	☐ DELETE	6.1 TITLE			Change A	Addition
NAME			6.2 NAME				
STREET ADDR	ESS		6.3 STREE	T ADDRESS			
I	1		0.40174	I			

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 or an attractment with an address.

4-28-98

805-2340013