2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After August 21, 1996. If Dissolved, Minimum Amount Due To Reinstate: \$738.75

| ANNUAL REPORT 1996   | FLORIDA DEPARTMENT OF<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATION | IONS 97 MAR 12 AM 9: 12   |
|--|---|---|
| FILING FEE Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee + \$25.00 LATE \$263.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE AND STATEMENT 96497  1. Name and Malling Address of Limited Liability Company DOCUMENT #200108  |   |   |
| HOT RECORD SALES, L.C.<br>7360 S.W. 48TH STREET<br>MIAMI FL 33155  |   | 7360 S.W. 48TH STREET MIAMI FL 33155  |
| If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.  2. Principal Place of Business  14500015957  Suite, Apt. #, etc.  Suite, Apt. #, etc.  |   | 3. Date Organized or Qualified   3a. State of Formation   |
| Zip Country Zip  | AMI FL  S169 Country  DAD   | 65-0127880 Not Applicable  6. Date of Last Report  6. Certificate of Status Desired  State Additional fee frequents |
| 7. Name and Address of Current Registers   |   | 8. Name and Address of New Registered Agent   |
| STRATTON, DOUGLAS D.<br>505 LINCOLN ROAD<br>MIAMI BEACH FL 33139   | Name<br>Street  |   |
| 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.   |   |   |
| SIGNATURE  |   |   |
| 10. Title Managing Members/Managers  | Business Stree  | et Address City, State and Zip Code   |
| MGR STONE, HENRY MGR STONE, JOE  | 7360 SW 48TH S  | MIAMI FL<br>4000021134941   |
|  |   | *****703.75 *****703.75 400021134941 -03/14/9701033015 *****212.50 *****212.50                                      |
| 11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address. |   |   |

SIGNATURE AND TYPE O OR PRINTED NAME OF SIGNING MANAGING MEMBER OF MANAGER