2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000000222

Entity Name: CIRCLE PRODUCTIONS, INC.

FILED Sep 13, 2002 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

2106 S. CYPRESS BEND DRIVE SUITE 402 POMPANO BEACH, FL 33069

Current Mailing Address: New Mailing Address:

2106 S. CYPRESS BEND DRIVE SUITE 402 POMPANO BEACH, FL 33069

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ALEXANDER, MARK ALEXANDER, ISAAC M

2106 S. CYPRESS BEND DRIVE SUITE 402 2106 S. CYPRESS BEND DRIVE SUITE 402

POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069

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.

SIGNATURE: ISAAC M ALEXANDER 09/13/2002

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change() Addition

 Name:
 ALEXANDER, ISAAC M
 Name:

 Address:
 233 N.W. 80TH TERRACE
 Address:

 City-St-Zip:
 MARGATE, FL 33063
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 HOWARTH, MICHAEL S
 Name:
 HOWARTH, MICHAEL S

 Address:
 531 SW 63RD AVE.
 Address:
 7485 NW 44TH STREET

 City-St-Zip:
 MARGATE, FL 33068
 City-St-Zip:
 LAUDERHILL, FL 33319

Title: SVTD () Delete Title: SVTD (X) Change () Addition

 Name:
 FINN, ROBERT J
 Name:
 VOLPE, SUZANNE

 Address:
 540 SW 2ND PLACE APT 3
 Address:
 218 NW 25TH STREET

 City-St-Zip:
 POMPANO BEACH, FL 33060
 City-St-Zip:
 WILTON MANORS, FL 33311

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZANNE VOLPE SVTD 09/13/2002