FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90193 027 ***158.75

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000081431

1. Entity Name
ARTIST CIRCLE, INC.

Principal Place of Business	Mailing Address
5052 LIDO STREET ORLANDO, FL 32807	5052 LIDO STREET ORLANDO, FL 32807

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
4704 E. MICHIGAN ST		4704 E. MICHIGAN ST.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: ORLANDO, FlORIDA		City & State: ORLANDO, FLORIDA	
Zip: 32812	Country: ORANGE	Zip: 32812	Country: ORANGE

4. FEI Number 54-206-5493 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FL
390 N ORANGE AVE STE 11000
ORLANDO, FL FL328-01

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number Is Not Acceptable)

City FL Zip 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. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2003, Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HUGILL, DENNIS 5052 LIDO STREET ORLANDO, FL 32807	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DENNIS HUGILL 5052 LIDO ST ORLANDO, FlORIDA 32807	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOSELER, KIMBERLY 5052 LIDO STREET ORLANDO, FL 32807	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P KIMBERLY MOSELER 3259 BELLINGHAM DR ORLANDO FlORIDA 32825	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: Dennis J Hugill DENNIS J. HUGILL 4/28/03 407 2732339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)