2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Principal Place of Business

HOLLYWOOD FL 33021

3800 NORTH HILLS DR., APT. #304

P02000086253

Mailing Address

HOLLYWOOD FL 33021

3800 NORTH HILLS DR., APT. #304

1. Entity Name NIKON ENTERTAINMENT AND PROMOTIONS, INC.



FILED Apr 11, 2003 8:00 am Secretary of State

04-11-2003 90090 017 ***150.00

2. Principal P	lace of Business 3. Mailing Address		F IDDINES IN BONE HOLK BONE TROUGHT OF THE FORM OF THE STREET BAND AND THE				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State City & State			4. FEI Number	 	Applied For Not Applicable		
Zip	Country	Zíp	Country	5. Certificate of Status D	Desired S8.75 A		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
KARAN, NICK 3800 NORTH HILLS DR., APT. #304 HOLLYWOOD FL 33021				Street Address (P.O. Box Number is Not Acceptable)			
			City		FL Zip Co	de	
the obligati SIGNATURE ــ FI	named entity submits this statement ons of registered agent. Signature, typed of printed name of registered agent ILE NOW!!! FEE IS \$150,00 May 1, 2003 Fee will be \$550.00	t and title if applicable. (NO		e required when reinstating) 9. Election Cam	4 Lulo 3 DATE paign Financing _ \$5.	00 May Be	
	Payable to Florida Department	of State	11.	Trust Fund Co	ontribution. L. Adde TO OFFICERS AND DIRECTOR	ed to Fees	
TITLE NAME STREET ADDRESS	D KARAN, NICK 3800 NORTH HILLS DR., APT. # HOLLYWOOD FL 33021	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSITIONS/CHANGES	☐ Change		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	The Property of the Property o	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	The second se	☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied wit	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	d in Section 119 07/3/0\ Florida S	☐ Change	Addition	

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: