2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

May 01, 2003 8:00 am Secretary of State P94000026532 DOCUMENT # 05-01-2003 90545 038 ***150.00 1. Entity Name TIBURON ENTERTAINMENT, INC. Principal Place of Business Mailing Address 2301 LUCIEN WAY 2301 LUCIEN WAY STF 395 STF 395 MAITLAND FL 32751 MAITLAND FL 32751 HS US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3232857 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Steve Chiang SCHAPPERT, JOHN C Street Address (P.O. Box Number is Not Acceptable) 2301 LUCIEN WAY Tiburon Entertainment, Inc **STE 395** <u> 2301 Lucien Way, Suite 395</u> MAITLAND FL 32751 Zip Code Mai.tland 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. President ☑ Chánge) / ☐ Addition ☐ Delete TITLE SCHAPPERT, JOHN C NAME NAME V. Paul Lee 2616 ORCHARD DR STREET ADDRESS STREET ADDRESS 4330 Sanderson Way apopka fl CITY-ST-ZIP CITY-ST-ZIP Burnaby, BC V5C 4X1 TITLE CF0 ☐ Delete TITLE Change / Addition Secretary NAME SOTHY, JOE NAME Ruth A. Kennedy STREET ADDRESS 2301 LUCIEN WAY STE 395 STREET ADDRESS 209 Redwood Shores Parkway CITY-ST-ZIP MAITLAND FL 32751 CITY-ST-ZIP Redwood City, CA 94065 TITLE Detete تعدر عالال Tresurer Addition NAME NAME Bryan Neider STREET ADDRESS STREET ADDRESS 209 Redwood Shores Parkway CITY-ST-7IP CITY-ST-ZIP Redwood City, CA 94065 TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITI F Change NAME NAME

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.

STREET ADDRESS

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