

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATION  
 00 OCT -6 PM 1:50

DOCUMENT # **9980000 98787**  
 1. Entity Name  
**STARBASE DIGITAL MULTIMEDIA INCORPORATED**

Principal Place of Business Mailing Address

2. Principal Place of Business **30677 OVERSEAS HWY.** 3. Mailing Address **24 HARVEY STREET**  
 Suite, Apt. #, etc. **SUITE # 11** Suite, Apt. #, etc.

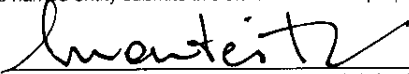
DO NOT WRITE IN THIS SPACE

City & State **BIG PINE KEY, FLORIDA** City & State **AYLMER, ON**  
 Zip **33043** Country **U.S.A.** Zip **N5H 1T1** Country **CANADA**

4. FEI Number **650885601** Applied For  Not Applicable   
 5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**ROBERT MONTEITH**  
**27229 OVESEAS HWY.**  
**RAMROD KEY FL 33042**

7. Name and Address of New Registered Agent  
 Name **ROBERT G MONTEITH**  
 Street Address (P.O. Box Number is Not Acceptable)  
**30677 OVERSEAS HWY # 11**  
 City **BIG PINE KEY FL** Zip Code **33043**

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.  
 SIGNATURE  **MONTEITH** DATE **September 29 2000**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$550.00**  
**After SEPTEMBER 13, 2000 Min. will be \$750.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> Delete
NAME	<b>D MONTEITH ROBERT</b>
STREET ADDRESS	<b>30677 OVERSEAS HIGHWAY # 11</b>
CITY-ST-ZIP	<b>BIG PINE KEY FL 33043</b>
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>400003422444--0</b>
CITY-ST-ZIP	<b>-10/12/00--01027--001</b>
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>****550.00 ****550.00</b>
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	<b>R 10/10</b>
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **MONTEITH** Date **Sept 29 2000** (888)607-8288  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (5/00)

STARBASE DIGITAL MULTIMEDIA  
24 HARVEY STREET  
AYLMER, ONTARIO N5H-1T1  
CANADA

Received  
September 29/00

Request taken by: lsellers  
09-20-2000

The forms you recently requested from this office are:

- (1) 201. COR Profit A/R

Should you have any questions or need any further information,  
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

please be advised that we did not receive the original filing request from your office and we then called Sept 20/00 to advise of this fact & requested a new filing be sent to us. At that time the customer service agent advised me to write this note and that the filing fee deadline would be extended and the fee would be \$550.00 (enclosed) Thank You Robert Martini