2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

DOCUMENT # A9400001,531						•	
MARK OF THE BEAR PARTNERSHIP, LTD.					FILED		
				01 APR 24 AM 10: 37			
Principal Place of Business Mailing Address 1551 SANDSPUR ROAD MAITLAND FL 32751 MAITLAND FL 32751					SECRETARY	37	
				SECRETARY OF S TALLAHASSEE. FL		ΓE.	
	•						
Principal Place of Business 3. Mailing Address							
Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State City & State				4. FEI Number Applied For		plied For	
					59-3278098 No.	t Applicable	
Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired Fee Required		
	6. Name and Address of Curren	t Registered Agent		Name	7. Name and Address of New Registered Agent		
DULIN, RAMSEY W ESQUIRE				Street Address (P.O. Box Number is Not Acceptable)			
201 E. PINE STREET, SUITE 1402							
ORLANDO FL 32801				City	City FL Zip Code		
8. The above named entity submits this statement for the purpose of changing its regis							
			10 , og ,oto.			1	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TE: Register	ed Agent signature requ			
Capital Co as Shown	ontributions . 61 000 000	10. Amount of Cap in FLORIDA to		ibutions	11. MAKE CHECK PAYABLE TO DEPT. OF SEE REVERSE SIDE FOR FEE INFOR		
	A GENERAL PARTNER NOTE: General Partners M	THAT IS A BUSINESS E	NTITY N	UST BE REGI	STERED AND ACTIVE WITH THIS OFFICE. ent must be filed to change a general partner.		
12.	2. GENERAL PARTNER INFORMATION			<u></u>	ADDRESS CHANGES ONLY	· · · ·	
DOCUMENT # NAME	WORLDWIDE RELEASES AND PRODUCTIONS, INC. 201 E. PINE STREET, SUITE 1402		STR	EET ADDRESS .			
STREET ADDRESS CITY-ST-ZIP			СПУ				
DOCUMENT #	P93000076289			EET ADDRESS	5000040825452		
NAME STREET ADDRESS	ASCENDING FILMS, INC.		c ID	Y-ST-ZIP	-04/26/0101118017 ****526.25 *****526.25		
CITY-ST-ZIP	HEATHROW FL 32746			1-31-21			
DOCUMENT # NAME	ME REET ADDRESS			EET ADDRESS			
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STREET ADDRESS CITY-ST-ZIP		;	CIT	Y-ST-ZIP			
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NAME STREET ADDRESS CITY-ST-ZIP			CITY	Y-ST-ZIP			
DOCUMENT #			STR	EET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		<u>/</u>	CiTY	Y-ST-ZIP			
14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes. ASCENDING FUNS CTAC							
SIGNATURE: SIGNATURED 4/19/01							