

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

04 APR -2 PM 6:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F01000004333**

1. Entity Name

SPINNER RIM, INC.

THE MIKE SHIANO SHOW, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

37 N. ORANGE AVENUE

3. Mailing Address

37 N. ORANGE AVENUE

Suite, Apt. #, etc.

SUITE 500

Suite, Apt. #, etc.

SUITE 500

City & State

ORLANDO, FL

City & State

ORLANDO, FL

Zip

32801

Country

USA

Zip

32801

Country

USA

4. FEI Number

06-1628070

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM

1200 SOUTH PINE ISLAND ROAD

PLANTATION

FL

Zip Code

34786

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 raising fees.)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PRESIDENT, CEO
TIMOTHY L. RAFTIS
2912 BUTLER BAY DRIVE NORTH
WINDERMERE, FL 34786**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**03/30/04--01020--001 **193.75
500031370365
03/30/04--01020--001 **193.75**

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

T. L. RAFTIS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/24/04

Date

321.695.5001

Daytime Phone #

CR2E034B (12/02)