

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2001 8:00 am
Secretary of State
 05-18-2001 91592 020 ***158.75

DOCUMENT # F 94000005550

1. Entity Name

CASSAR FILMWORKS INC.

Principal Place of Business

Mailing Address

**1168-B NEW HAVEN AVE. W.
 WEST MELBOURNE, FL
 32904**

**1168-B NEW HAVEN AVE. W.
 WEST MELBOURNE, FL
 32904**

2. Principal Place of Business

1160 NEW HAVEN AVE. W.

3. Mailing Address

4 LARGE COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WEST MELBOURNE, FL

City & State

BRAMPTON, ON

4. FEI Number

59-3275169

Applied For

Not Applicable

Zip

32904

Country

U.S.A.

Zip

L6S 5V2

Country

CANADA

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CASSAR, JON. F.
 1168-B NEW HAVEN AVE. W.
 WEST MELBOURNE, FL 32904**

Name **CASSAR, JON. F.**

Street Address (P.O. Box Number is Not Acceptable)
1160 NEW HAVEN AVE. W.

City **WEST MELBOURNE** FL Zip Code **32904**

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

Signature, typed or printed name of registered agent and title if applicable.

JON F. CASSAR

(NOTE: Registered Agent signature required when reinstating)

April 25, 2001

(DATE)

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 \$150.00

After MAY 1, 2000 Fee will be \$550.00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
 NAME **CASSAR, JON**
 STREET ADDRESS **4 LARGE COURT**
 CITY-ST-ZIP **BRAMPTON, ON L6S 5V2**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VD** ☐ Delete
 NAME **CASSAR, KRISTINA F.**
 STREET ADDRESS **4 LARGE COURT**
 CITY-ST-ZIP **BRAMPTON, ON L6S 5V2**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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)(a), 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:

K. Cassar KRISTINA CASSAR

April 25, 2001 905-451-3596

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #