

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000004618

1. Entity Name
CELLO MUSIC & FILM SYSTEMS, INC.

FILED
Apr 12, 2000 8:00 am
Secretary of State
04-12-2000 90040 007 ***150.00

Principal Place of Business
FAIRVIEW PARK DRIVE
FALLS CHURCH VA 22042

Mailing Address
3112 FAIRVIEW PARK DRIVE
FALLS CHURCH VA 22042-4504



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

4. FEI Number 54-1851418
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MCGRATH, PETER
3750 KENT COURT
COCONUT GROVE FL 33133

7. Name and Address of New Registered Agent
Name Bob RAUSCH (ROBERT S. RAUSCH)
Street Address (P.O. Box Number is Not Acceptable) HUNTON & WILLIAMS
1 Biscayne Tower, 2 S. Biscayne Blvd Ste 2500
City MIAMI FL Zip Code 33131

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] Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ **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	PCTD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, RICHARD L JR		NAME		
STREET ADDRESS	3112 FAIRVIEW PARK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	FALLS CHURCH VA 22042		CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIDGMORE, JOHN W		NAME		
STREET ADDRESS	3112 FAIRVIEW PARK DRIVE		STREET ADDRESS		
CITY-ST-ZIP	FALLS CHURCH VA 22042		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DANIELS, DAVID		NAME		
STREET ADDRESS	3112 FAIRVIEW PARK DR		STREET ADDRESS		
CITY-ST-ZIP	FALLS CHURCH VA 22042		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STRAUSS, LES B		NAME		
STREET ADDRESS	3112 FAIRVIEW PARK DR		STREET ADDRESS		
CITY-ST-ZIP	FALLS CHURCH VA 22042		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)