

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004166

1. Entity Name

CACTUS NEW MEDIA I, INC.

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90027 048 ***158.75

Principal Place of Business
235 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33139

Mailing Address
235 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33139

2. Principal Place of Business
437 41st Street

3. Mailing Address
437 41st Street

Suite, Apt. #, etc.
218

Suite, Apt. #, etc.
218

City & State
Miami Beach

City & State
Miami Beach, FL

Zip
33140

Country
USA

Zip
33140

Country
USA

4. FEI Number
65-0907798

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
235 LINCOLN ROAD #204
MIAMI BEACH FL 33139

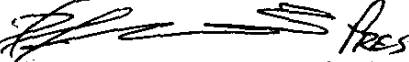
7. Name and Address of New Registered Agent

Name
305-672-9200 Management, Inc.

Street Address (P.O. Box Number is Not Acceptable)
437 Forty First Street # 200

City Miami Beach 33140 FL Zip Code

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  Pres. 305-672-9200 Management, Inc/Pres. 4/25/01

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. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

CDPV
SCHMITT, RS
235 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33139 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

ST
SCHMITT, RS
235 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33139 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

437 Arthur Godfrey RD.
Miami Beach, FL 33140 ☒ Change ☐ Addition

CDPVST
Schmitt, RS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

437 Arthur Godfrey RD.
Miami Beach, FL 33140 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:  Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/25/01 305-672-2700

Date Daytime Phone #

CR2E034 (10/00)

017075