

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F99000006236**

1. Entity Name

FILMACIONES TEPUY FILMS, S.A.

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90046 041 ***550.00

Principal Place of Business

13800 SW 106 ST.
MIAMI FL 33186

Mailing Address

13800 SW 106 ST.
MIAMI FL 33186

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

BARRERA, IGNACIO
13800 SW 106 ST.
MIAMI FL 33186

7. Name and Address of New Registered Agent

Name **SANTANA, MARCOS**

Street Address (P.O. Box Number is Not Acceptable)

2745 Ponce de Leon Blvd.City **Coral Gables****FL**Zip Code **33134**

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.

(NOTE: Registered Agent signature required when reinstating)

SANTANA, MARCOS**9/1/00**

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 \$550.00**
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State10. 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 **CD** ☐ Delete
NAME **SANTANA, MARCOS**
STREET ADDRESS **13800 SW 106 ST.**
CITY-ST-ZIP **MIAMI FL**TITLE **CD** ☐ Change ☐ Addition
NAME **SANTANA, MARCOS**
STREET ADDRESS **2745 PONCE DE LEON BLVD**
CITY-ST-ZIP **CORAL GABLES 33134**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ Delete
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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)(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:

SANTANA, MARCOS **9/1/00** **305 774 0033**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20034 (5/00)