

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # **G61737-**

1. Entry Name

Bodine Studios, Inc.**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

4066 Jewfish Dr.

Suite, Apt. #, etc.

3. Mailing Address

220 Central Park So.

Suite, Apt. #, etc.

Suite 3-H

DO NOT WRITE IN THIS SPACE

City & State

Spring Hill, FL

City & State

NYC, NY

4. FEI Number

592377905

Applied For

Not Applicable

Zip

34607

Country

USA

Zip

10019

Country

USA5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Edmund Bodine, Jr.

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

4066 Jewfish Dr.

City

Spring Hill

FL

Zip Code

34607**DO NOT WRITE
IN THIS SPACE**

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)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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 | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|----------------------|--------------------|---|-------|------|----------------|-------------|
| | President & Director | Edmund Bodine, Jr. | 4066 Jewfish Dr. Spring Hill, FL 34607 | | | | |
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**DO NOT WRITE
IN THIS SPACE**

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 11, 2002 (917) 549-4870

Date

Daytime Phone #

BODINE STUDIOS, INC.

4066 Jewfish Drive
Spring Hill, Florida 34607

June 13, 2002

Secretary of State
Tallahassee, FL 32314

To Whom it May Concern,

I am sending this letter along with a check for \$150.00 for the 2002 corporate report filing for Bodine Studios, Inc.

I never received the reporting documents for 2002. Within this past week when I requested a certificate of good standing from Capitol Connections, I was advised that the corporate report filing was not done for 2002.

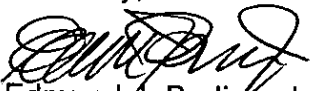
I have always paid my bills for this corporation and am respectfully requesting that the penalty fees be waived. Also please send all report filings to my mailing address:

Edmund Bodine Jr.
220 Central Park South, #3-H
New York, NY 10019

As I travel extensively, this is the only address where I can be sure that mail reaches me.

Thank you for your kind consideration of my request.

Sincerely,



Edmund J. Bodine, Jr.
President

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Bodine Studios, Inc.

RECEIVED
02 JUN 17 PM 3:39
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Corrected

Signature _____

Requested by: _____

Name _____

Date

Time

Walk-In

Will Pick Up

RECEIVED
02 JUN 14 AM 11:03
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

____ Art of Inc. File _____
____ LTD Partnership File _____
____ Foreign Corp. File _____
____ L.C. File _____
____ Fictitious Name File _____
____ Trade/Service Mark _____
____ Merger File _____
____ Art. of Amend. File _____
____ RA Resignation _____
____ Dissolution / Withdrawal _____
✓ Annual Report / Reinstatement _____
____ Cert. Copy _____
____ Photo Copy _____
____ Certificate of Good Standing _____
____ Certificate of Status _____
____ Certificate of Fictitious Name _____
____ Corp Record Search _____
____ Officer Search _____
____ Fictitious Search _____
____ Fictitious Owner Search _____
____ Vehicle Search _____
____ Driving Record _____
____ UCC 1 or 3 File _____
____ UCC 11 Search _____
____ UCC 11 Retrieval _____