2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 28, 2000 8:00 am Secretary of State DOCUMENT # **H29992** 1. Entity Name VIDEOMAX PRODUCTIONS, INC. 08-28-2000 90032 023 ***150.00 Principal Place of Business Mailing Address 1359 N.E. 149TH STREET 1959 N.E. 149TH STREET N. MIAMI FL 33181 N MIAMI FL 33181 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 59-2540704 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BATT, FAITH ANTMAN Street Address (P.O. Box Number is Not Acceptable) 9064 CARLYLE AVENUE SURFSIDE FL 33154 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 Fiorida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5:00** May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. PTD ☐ Addition Change ☐ Delete TITLE TITLE BATT, FAITH ANTMAN NAME NAME 9064 CARLYLE AVENUE STREET ADDRESS STREET ADDRESS SURFSIDE FL CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE BATT, LAYNE NAME NAME 9064 CARLYLE AVENUE STREET ADDRESS STREET ADDRESS SURFSIDE FL CITY-ST-7IP CITY-ST-ZIP Addition Delete ☐ Change TITLE NAME NĂME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE 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.

STREET ADDRESS CITY-ST-ZIP

_TITLE NAME

SIGNATURE:

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

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☐ Delete

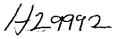
2-10-00

305-867-8373

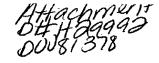
Change

Addition

Daytime Phone #



DRU D. LASHBROOK & ASSOCIATES, P.A. CERTIFIED PUBLIC ACCOUNTANTS



Dru D. Lashbrook, CPA Brian H. Wollard, CPA David J. Fasano, CPA,MBA Dean R. Lashbrook Member of the Florida Institute of Certified Public Accountants

4481 Stirling Road Fort Lauderdale, Florida 33314 Telephone: (954) 581-8112 Fax: (954) 581-2554 łashbrook@lbrook. com

August 22, 2000

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, Florida 32302-1500

RE: VideoMax Productions, Inc.

Document # H29992

EIN# 59-2540704

To whom it may concern:

We are the Certified Public Accountants for the above referenced corporation. Enclosed please find the 2000 Uniform Business report for the above referenced taxpayer. The taxpayer received this 2nd notice and contacted the State. They never received the original report and were told to mail this report with a check for \$150.00 immediately.

Enclosed please find the signed report and check as requested. Thank you for your assistance in this matter, and if you should have any questions please contact our office..

Sincerely,

DRU D. LASHBROOK & ASSOCIATES, P.A.

Dru D. Lashbrook, CPA, for the firm.

DDL/kd

Enc.