2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # J52442 Apr 21, 2000 8:00 am Secretary of State 1. Entity Name MEDIEVAL SHOW, INC. 04-21-2000 90128 011 ***150.00 Principal Place of Business Mailing Address P.O. BOX 422385 P.O. BOX 422385 KISSIMMEE FL 34742-2385 KISSIMMEE FL 34742-2385 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2840137 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.. Name and Address of Current Registered Agent = 7. Name and Address of New Registered Agent CHIUSOLO, ERIC Street Address (P.O. Box Number is Not Acceptable) 4510 W. IRLO BRONSON MEM HWY KISSIMMEE FL 32742 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DP ☐ Change ☐ Addition ☐ Delete TITLE TITLE KIM, KENNETH NAME NAME STREET ADDRESS 7662 BEACH BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **BUENA PARK CA** ☐ Addition Change ☐ Delete TITLE CHISOLO, ERIC NAME STREET ADDRESS 7662 BEACH BLVD. STREET ADDRESS CITY-ST-ZIP BUENA PARK CA CITY-ST-ZIP Change Delete TITLE Addition HAMANN, HAROLD NAME NAME STREET ADDRESS 4510 W. IRLO BRONSON HWY. STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete MONTANER, PEDRO NAME NAME STREET ADDRESS STREET ADDRESS 7662 BEACH BLVD. CITY-ST-ZIP CITY-ST-ZIP **BUENA PARK CA 90622** TITLE Change ☐ Addition ☐ Delete TITLE SANTANDREU, MARTIN NAME NAME STREET ADDRESS 7662 BEACH BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE **BUENA PARK CA 90622** Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 13. I hereby certify that the information supplied with this filing does not sualify 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 about may 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 to see 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 a

ERIC CHIUSOLO