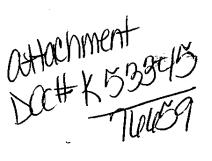
6 FILED 2001 UNIFORM BUSINESS REPORT (UBR) Jul 19, 2001 8:00 am **Secretary of State** 06-26-2001 90003 019 \*\*\*150.00 SARASOTA AMUSEMENT ENT, INC. Mailing Address 5131 WAUCHULA ROAD X HE MYAKKA CITY, FL 34251 76659 2. Principal Place of Business 3. Mailing Address 5131 WAUCHULA ROAD Suite, Apt. # etc. Suite. Apt. #. etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For MYAKKA CI Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired MANATEL Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROBERT KOSIN. 1900 MAIN STREET, SUIT 210 Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL Zip Code for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity cubmits this state SIGNATURE 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, 2001 Fee will be \$550.00 -Trust Fund Contribution.-(See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition PRESIDENT ☐ Delete TITLE TITLE ESTER H COLEGROUE NAME NAME STREET ADDRESS STREET ADDRESS 5131 WAUCHULA ROAD CITY-ST-ZIP CITY-ST-ZIP YAKKA CITY, FL ☐ Addition DIRECTOR TITLE Change MLE ROBERT ROSIN 1900 NAINSTREET, SUITE 210 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - Z(P TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITE F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby certify that the information supplied with this filling 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 sustee empowered be executed this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if SIGNATURE:

GNING OFFICER OR DIRECTOR

1

Davis⊓e Phone #





**Katherine Harris** Secretary of State

June 27, 2001

SARASOTA AMUSEMENT ENTERPRISES, INC. 5131 WAUCHULA RD MYAKKA CITY, FL 34251-6720 US

Subject: SARASOTA AMUSEMENT ENTERPRISES, INC.

Reference K53345

Number:

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report has not been filed and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by an officer or director of the corporation.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the

Division of Corporations at (850) 488-9000.

ANNUAL REPORTS SECTION

1/9/01 (200 N) 5/0/10/05/20