2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

K62819 **DOCUMENT#**

1. Entity Name



FILED Feb 26, 2003 8:00 am Secretary of State 02-26-2003 90174 001 ***150.00

DESANTI VIDEO PRODUCTIONS, INC.				02-20-2003 901	4001 130	3.00
12668 82NE	lace of Business D LANE NORTH A BEACH FL 33412	Mailing Address 12668 82ND LANE NO WEST PALM BEACH FO US		- I ITBIRIN ŠIU BIJIT HERV IBIDE HOJU I	li alb ai dir ik dikali dal	NA BIBNI BIBNI NBAT
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State		CHECK HERE IF MAKING CHANGES 4. FEI Number OF COOCAGE Applied For		
		'	Country	5. Certificate of Status Desired [\$8.75 A	Additional
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Regis	tered Agent	
DESANTI	I, MICHAEL A.		Name			
12668 82	2ND LANE NORTH		Street Addres	s (P.O. Box Number is Not Acceptable)		
WEST PA	ALM BEACH FL 33412					
	e sterioù de la company de La company de la company d		City		Zip Co	nda .
8. The abov	e named entity submits this statement for	r the purpose of changing it	is registered office or regist	tered agent, or both, in the State of Florida.	FL Zip Co	
the obliga	ations of registered agent,			tored agent, or both, in the State of Florida.	I am familiar with	1, and accept
SIGNATURE	Signature, typed or printed name of registered agent at	nd title if confeable				
	FILE NOW!!! FEE IS \$150.00	(NO	TE: Registered Agent signature require	red when reinstating)	DATE	
Afte	er May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	State		9. Election Campaign Financin Trust Fund Contribution.		00 May Be ed to Fees
10.	OFFICERS AND D		11.	ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME	PECANTI MICHAELA	☐ Delete	TITLE /	THE THE TOTAL AND THE OFFICERS	Change	AS IN 11
STREET ADDRESS CITY-ST-ZIP	DESANTI, MICHAEL A. 12668 82ND LANE NORTH PALM BCH FL 33412		NAME STREET ADDRESS CITY-ST-ZIP		ondingo	C) Addition
TITLE NAME STREET ADDRESS	VP DESANTI, SUSAN M. 12668 82ND LANE NORTH	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change	☐ Addition
CITY-ST-ZIP~~·	PALM BCH FL 33412		CITY-ST-ZIP-	- Company of the control of the cont	. =====================================	~===× .=××.
NAME Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS		☐ Change	☐ Addition
ITY-ST-ZIP			CITY-ST-ZIP]
ITLE AME TREET ADDRESS		Delete	TITLE NAME STREET ADDRESS		Change	☐ Addition
TLE AME IREET ADDRESS TY-ST-ZIP		☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	· ,	☐ Change	☐ Addition
2. I hereby ce indicated c	ertify that the information supplied with this on this report or supplemental report is truoration or the receiver or trustee empower on an attachment with an address, with	is filing does not qualify for ue and accurate and that m red to execute this report a all other like empowered.	CITY-ST-ZIP the exemption stated in Server signature shall have the signature of the signa	ction 119.07(3)(i), Florida Statutes. I further same legal effect as if made under oath; tha , Florida Statutes; and that my name appea	certify that the in it I am an officer or in Block 10 or	formation or director Block 11 if

SIGNATURE:

Michael G. DesanhED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2-20-03

Date

(561) 791-7650