

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000006613

1. Entity Name

DIANE'S BOYS ENTERTAINMENT LLC

FILED
Sep 15, 2002 8:00 am
Secretary of State

09-15-2002 90090 017 ****50.00

0014965

Principal Place of Business	Mailing Address
% COMART & KOPPEL CPA'S LLC 450 SEVENTH AVENUE, SUITE 2107 NEW YORK NY 10123-2107	% COMART & KOPPEL CPA'S LLC 450 SEVENTH AVENUE, SUITE 2107 NEW YORK NY 10123-2107

980684



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business c/o M*R*COMART LLC 450 SEVENTH AVE., STE 1701 NEW YORK, NY 10123-1701	3. Mailing Address c/o M*R*COMART LLC 450 SEVENTH AVE., STE 1701 NEW YORK, NY 10123-1701
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City & State	City & State	4. FEI Number 13-4169515	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BLUMBERG EXCELSIOR CORPORATE SERVICES, INC 4435 OLD WINTER GARDEN ROAD ORLANDO FL 32811	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 25, 2002

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PRES TERRANCE KELLY c/o M*R*COMART LLC 450 SEVENTH AVE., STE 1701 NEW YORK, NY 10123-1701	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Terrance Kelly*

212-563-3100

CR2E083 (4/02)