

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000005940

FILED  
May 27, 2003  
Secretary of State

Entity Name: ORBIT THEATRE, INC.

## Current Principal Place of Business:

7446 SOUTH FEDERAL HIGHWAY  
PORT ST. LUCIE, FL 34952

## New Principal Place of Business:

1735 6TH AVENUE  
#3  
VERO BEACH, FL 32960

## Current Mailing Address:

PO BOX 881223  
PORT ST. LUCIE, FL 349881223

## New Mailing Address:

PO BOX 2732  
VERO BEACH, FL 32961

FEI Number: 56-2284975

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANDERS, NATHAN  
3741 SW COQUINA COVE WAY #204  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

SANDERS, NATHAN  
1735 6TH AVENUE  
#3  
VERO BEACH, FL 32960 US

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:

05/27/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SANDERS, NATHAN  
Address: 3741 SW COQUINA COVE WAY #204  
City-St-Zip: PALM CITY, FL 34990

Title: VD ( ) Delete  
Name: EULO, ARLETTE  
Address: 5324 SW AVILA CT.  
City-St-Zip: PALM CITY, FL 34990

Title: TD ( ) Delete  
Name: JEFFERSON, JOANN  
Address: 6103 YUCCA DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34982

Title: SD (X) Delete  
Name: CHRISTENSEN, KEITH  
Address: 1941 SW HILLMAN ST.  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: D ( ) Delete  
Name: VALICENTI, ANTHONY JR  
Address: 3741 COQUINA COVE #204  
City-St-Zip: PALM CITY, FL 34990

Title: D (X) Delete  
Name: CAZZOLLA, PAUL  
Address: 1941 SW HILLMAN ST.  
City-St-Zip: PORT ST. LUCIE, FL 34953

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SANDERS, NATHAN  
Address: 1735 6TH AVENUE, #3  
City-St-Zip: VERO BEACH, FL 32960

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: VALICENTI, ANTHONY JR  
Address: 1735 6TH AVENUE, #3  
City-St-Zip: VERO BEACH, FL 32960

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NATHAN SANDERS

PD

05/27/2003

Electronic Signature of Signing Officer or Director

Date