

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 13, 2003 8:00 am**  
**Secretary of State**

01-13-2003 90830 023 \*\*\*158.75

**DOCUMENT # P00000003177**

1. Entity Name  
**BUENA VIDA PRODUCTIONS, INC.**



Principal Place of Business  
**4100 N. OCEAN DRIVE  
UNIT 1801, #44  
SINGER ISLAND FL 33404**

Mailing Address  
**C/O BELFONTI ASSOCIATES  
ONE HAMDEN CENTER-2319 WHITNEY AVE.  
HAMDEN CT 06518**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

Zip

Country

Zip

Country

4. FEI Number **65-0978398**

Applied For  
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GALLOWAY, GREGORY B**

**% GALLOWAY & ASSOCIATES, P.A., 1000 UNIVERSA  
L PLAZA, BLDG. 22A, STE. 218  
ORLANDO FL 32819**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
BELFONTI, MICHAEL  
2319 WHITNEY AVE STE 1A  
HAMDEN CT 06518** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VSD  
RAUCCI, PAUL  
4100 N. OCEAN DR., UNIT 1801, #44  
SINGER ISLAND FL 33404** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
ECHAVARRIA, HECTOR  
421 AVENUE F  
REDONDO BEACH CA 90277** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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☐ Change ☐ Addition

12. 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

**SIGNATURE REQUIRED: Michael Belfonti**  
President

Date

Daytime Phone #

**1/6/03 (203) 230-1600**

CR2E034 (10/02)

Attachment

# P00000003177-00/076

**Buena Vida Productions, Inc.**

c/o MCR

2319 Whitney Avenue, Suite 1A  
Hamden, CT 06518

(203) 230-1600

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January 10, 2003

Division of Corporations  
Uniform Business Report Filings  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Via: U.S. Mail

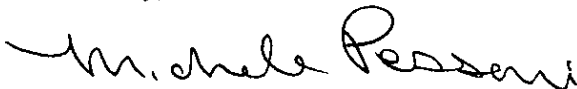
Re: Buena Vida Productions, Inc.

Dear Florida Dept. of State:

Enclosed please find the 2003 Uniform Business Report for the above referenced entity,  
along with a check for \$158.75.

Please send the Certificate of Status at your earliest convenience.

Sincerely,



Michele Pessoni