

**FILED**  
**Apr 28, 2004 8:00 am**  
**Secretary of State**

04-28-2004 90163 044 \*\*\*150.00

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

DOCUMENT # **P00000009552**  
 1. Entity Name: **JOHN STUD PRODUCTION, INC.**



**DO NOT WRITE IN THIS SPACE**

**94068657**

2. Principal Place of Business: **2370 N.E. 137 ST.**  
 Suite, Apt. #, etc.

3. Mailing Address: **P.O. Box 611892**  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State: **N. MIAMI BCH., FLA.** City & State: **MIAMI, FLA.** 4. FE Number: **65-0977473** Applied For:  (Not Applicable)

Zip: **33181** Country: **U.S.A.** Zip: **33261-1892** Country: **U.S.A.** 5. Certificate of Status Desired:  \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name: **Spiegel & Utrera, P.A.**

Street Address (P.O. Box Number is Not Applicable): **1840 Coral Way, 4th Floor**

City: **MIAMI** FL Zip Code:

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_

January 1 - May 1 Fee is \$150.00  
 After May 1, Fee is \$550.00  
 Amended UBR is \$61.25

9. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>PSTD</b>						
	<b>PECCIOLO, JOHN R</b>						
	<b>2370 N.E. 136 LANE</b>						
	<b>NORTH MIAMI BEACH, FL 33181</b>						

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental reports 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 executor or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address, with all other like empowered

SIGNATURE: **John R. Peccolo** **JOHN R. PECCIOLO** **4/22/04 (305) 940-1952**

CR23034B (12/02)