FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90438 008 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000035925

1. Entity Name

EAST UNIT Entertainment

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business	3. Mailing Address
550 Water St.	550 Water St.
Suite, Apt. #, etc. 1311	Suite, Apt. #, etc. 1311
City & State Jacksonville, Florida	City & State
Zip 32202 Country	Zip Country

4. FEI Number 59-3667238 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Josh Callahan

Street Address (P.O. Box Number is Not Acceptable): 550 Water St. #1311

City: Jacksonville FL Zip Code: 32202

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.

SIGNATURE: * _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	(P) President/(M) Managing Director
NAME	Charlie Flentry
STREET ADDRESS	550 Water St #1311
CITY-ST-ZIP	Jacksonville, FL 32202
TITLE	(V) Vice President/(T) Treasurer
NAME	Cedric A Terrell
STREET ADDRESS	550 Water ST #1311
CITY-ST-ZIP	Jacksonville, FL 32202
TITLE	(D) Director/(C) Chairman
NAME	Josh S. Callahan
STREET ADDRESS	550 Water ST #1311
CITY-ST-ZIP	Jacksonville, FL 32202
TITLE	
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CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: * Josh S Callahan 5-01-02 (904) 353-0015

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #