

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2002 8:00 am
Secretary of State

07-25-2002 90127 036 ***150.00

DOCUMENT # P00000048142

1. Entity Name

MISSION ENTERTAINMENT CORP.

✓

Principal Place of Business

2826 CARL TERRACE
 ORLANDO FL 32804

Mailing Address

327 W GRANT STREET
 ORLANDO FL 32806

B0132354



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

P.O. Box 547728

Suite, Apt. #, etc.

P.O. Box 547728

City & State

Orlando Florida

City & State

Orlando Florida

Zip

32854-7728

Country

USA

Zip

32854-7728

Country

USA

4. FEI Number

59-3646694

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

TAYLOR, JEFFREY

2826 CARL TERRACE
 ORLANDO FL 32804

7. Name and Address of New Registered Agent

Name

Jeffrey Taylor

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

847 Post Lane

City

Orlando

FL

Zip Code

32804

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
 NAME TAYLOR, JEFFREY
 STREET ADDRESS 2826 CARL TERRACE
 CITY-ST-ZIP ORLANDO FL 32804 ☐ Delete

TITLE PD
 NAME Taylor, Jeffrey
 STREET ADDRESS 847 Post Ln
 CITY-ST-ZIP Orlando, FL 32804 ☒ Change ☐ Addition

TITLE VPD
 NAME TAYLOR, CARLA
 STREET ADDRESS 2826 CARL TERRACE
 CITY-ST-ZIP ORLANDO FL 32804 ☐ Delete

TITLE VPD
 NAME Taylor, Carla
 STREET ADDRESS 847 Post Ln
 CITY-ST-ZIP Orlando, FL 32804 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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 CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

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

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/22/02 407-592-6000
 Date Daytime Phone #

CR2E034 (9/01)

*Attachment
Court
PO0000048142*

Mission Entertainment Corp.

**P.O. Box 547728
Orlando, FL 32854-7728
PH: 407-649-6709
FX: 407-650-0058**

Date: July 23,2002

To Whom It May Concern:

Please accept this payment for our yearly corporate report. We earlier this year moved our offices and this document was inadvertently misplaced. Upon finding it this week I immediately took care of sending it back to the state. I respectfully ask that the fine for late payment be waived. We are currently settled in a new office and will make sure this does not happen again in the future. We appreciate your understanding in this matter.

Sincerely,


Jeffrey Taylor