

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000065114

1. Entity Name  
PERFECT WORLD PRODUCTIONS, INC.

Principal Place of Business  
834 SW 30TH ST. SUITE #3  
FT LAUDERDALE FL 33315

Mailing Address  
834 SW 30TH ST. SUITE #3  
FT LAUDERDALE FL 33315

2. Principal Place of Business  
38 S. Fed Hwy  
Suite, Apt. #, etc.  
#1

3. Mailing Address  
38 S. Fed Hwy  
Suite, Apt. #, etc.  
#1

City & State  
Dania Beach, FL  
Zip  
33004  
Country  
USA

City & State  
Dania Beach, FL  
Zip  
33004  
Country  
USA

4. FEI Number  
59-366 9351

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

6. Name and Address of Current Registered Agent  
BENNETT, MITCHELL A II  
834 SW 30TH ST, SUITE #3  
FT LAUDERDALE FL 33315

7. Name and Address of New Registered Agent  
Name  
BENNETT, MITCHELL A II  
Street Address (P.O. Box Number is Not Acceptable)  
38 S. Fed Hwy #1  
City  
Dania Beach FL Zip Code  
33004

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

DATE  
Sept 12, 2001

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 \$550.00  
After September 12, 2001 Fee will be \$750.00  
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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
BENNETT, MITCHELL A II  
834 SW 30TH ST, SUITE #3  
FT LAUDERDALE FL 33315

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSTD  
ARRIOLA-BENNETT, ANA R  
834 SW 30TH ST, SUITE #3  
FT LAUDERDALE FL 33315

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 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: Matthew C. Bennett  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE  
Sept 12, 2001

FILED

01 NOV -8 AM 11:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



REINSTATEMENT

0065185 AV

CR2E034 (5/01)