## 2003 FOR PROJET CORPORATE UNIFORM BUS TESS REPORT

DOCUMENT # P0000076953  1. Entity Name ZONE ENTERTAINMENT USA, INC.				FILED  03 HOV 13 PH 12: 21			
Principal Place of Business 4141 NW 5TH ST #104 PLANTATION FL 33317		Mailing Address 4141 NW 5TH ST #104 PLANTATION FL 33317		SECRETARY OF ST	IATE ORIDA		
2. Principal P	Place of Business	3. Mailing Address	Mailing Address			54 mining	EIIEE IIII IEEI -
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		STATIBLICHECK HERE #FMAR	ING CHANGES	<b>*</b>
City & State		City & State			4. FEI Number		oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current I	Registered Agent			7. Name and Address of New Register	red Agent	
MURING DUNCAN							
PLANTATION FL 33317				ddress (F	P.O. Box Number is Not Acceptable)		
PlANT	City	300024292 <b>7</b> 93 City 10/30/03-01047-006 <b>FL*</b> *150eWJ					
the obligat	ions of registered agent.  Munim Duncan Signature, typed or printed name of registered agent a	Marine 1		U	ed agent, or both, in the State of Florida. I		and accept
After Sep Make Check			9. Election Campaign Financing Trust Fund Contribution.	☐ Added	May Be I to Fees		
10.	OFFICERS AND I		11.	-	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SAMUELS, HERALDO 7202 SOUTHGATE BLVD NORTH LAUDERDALE FL 33068	· Delete	NAME STREET ADDRESS CITY-ST-ZIP	Plan	RING DUNCAN HATION FI 317	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-2IP	AN7 414 PLAJ	HONY DEHANEY NO ST ST NTATION FL 3317	☐ Change.	Addition
TITLE NAME STREET ADDRESS - CITY-ST-ZIP		☐ Delete	TITLE S NAME STREET ADDRESS CITY-ST-ZIP	414	NEL HENRY. I NW 5th St. ANTATION FL	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete ,	TITLE S NAME STREET ADDRESS CITY-ST-ZIP	HER 414	PALDO SAMUELS I NW 5th st. DTATION FL.	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	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
12 Lhereby c	certify that the information supplied with	this filing does not qualify for	the exemption sta	ted in Sec	tion 119.07(3)(i), Florida Statutes. I further ame legal effect as if made under oath; the	certify that the in	nformation

of the corporation of the receiver of trustee empowered to execute this report changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MELENCOLIPE REQUIRED URING DUNKAN (954) 588 0085

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date ... Dayline Phone #

CR2E034 (4/03)

## Zone Britusamo

FLORIDA DEPT OF STATE 11/10/03 lif# 100000076953

DEAR SIRS.
After CALLING IN AN TALKING

lo ONE OF YOUR REPRESENTATIVE ON THE TELEPHONE ON THURSDAY SHE ADVISOR ME THAT any Filing WAS CATE, IT WAS EXPLAINED TO HOK THAT MY PAPORNORK WAS NOT RECEIVED UNIIL THIS TIME, SO THE LATE FILING WAS NOT A FAULT DE OUR COMPANY. AT THIS TIME SHE SUGSESTED THAT THE ESCPLANATION BE PUT IN WRITING. WE DID NOT RECEIVE THE RENEWAL IN TIME PLEASE WATUE The PENALTIES. Thankyon

Murine Duncan