## 2002 UNIFORM BUSINESS REPORT (UBR)

## P00000086340 **DOCUMENT #**

1. Entity Name

07-11-2002 90241 008 \*\*\*150.00 KATIE BEE ENTERTAINMENT, INC. Mailing Address Principal Place of Business C/O KATHLEEN M. DIVELLA C/O KATHLEEN M. DIVELLA 271 SW GLEN RD. 271 SW GLEN RD. PT. ST. LUCIE FL 34953 PT. ST. LUCIE FL 34953 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-1027686 Not Applicable Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired  $\Box$ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DIVELLA, KATHLEEN Street Address (P.O. Box Number is Not Acceptable) 271 SW GLEN RD PORT SAINT LUCIE FL 34953 City Zip Code 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** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Addition Delete TITLE ☐ Change TITLE DIVELLA, KATHLEEN NAME NAME 271 SW GLEN RD STREET ADDRESS STREET ADDRESS **PORT SAINT LUCIE FL 34953** CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY\_ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME

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

STREET ADDRESS

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STREET ADDRESS

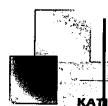
CITY-ST-ZIP

FILED

Jul 11, 2002 8:00 am

Secrétary of State





KATE BEE ENTERTAINMENT, INC. EDUCATIONAL DIVISION

## Motivational Programs With Fun And Laughter!

July 6, 2002



To-Whom It May Concern:

When we received this in the mail we immediately contacted the people who file our income tax and were told that we should have received this in January.

I am inclosing a check for \$150, which we were told was the required payment in January. Please excuse this delay since this was the first notice we have received.

We are only a husband and wife who entertain children for a living and this is a new experience for us. If we had received this paperwork in January we would have certainly sent in our \$150 check then.

Thank you for your understanding.

Sincerely,

Kathy Divella

Katie Bee Entertainment, Inc.