

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
 05-28-2002 91782 023 ***150.00

DOCUMENT # P00000101298

1. Entity Name
NEW MEDIA WEB CASTING INC.

Principal Place of Business

**3801 S. OCEAN DRIVE
 STE. 15N
 HOLLYWOOD FL 33019**

Mailing Address

**3801 S. OCEAN DRIVE
 STE. 15N
 HOLLYWOOD FL 33019**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1050452

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LOPEZ, IRIS

**3801 S. OCEAN DRIVE
 STE. 15N
 HOLLYWOOD FL 33019**

Name

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

9721 Hammocks Blvd #101

City **Miami**

FL

33196

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.

IRIS LOPEZ (ST) changed to IRIS SANJUAN

DATE

05/01/02

**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 ☐ Delete
NAME LOPEZ, EDUARDO
STREET ADDRESS 3801 S. OCEAN DRIVE, STE. 15N
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE PD ☒ Change ☐ Addition
NAME Lopez Eduardo
STREET ADDRESS 9721 Hammocks Blvd #101
CITY-ST-ZIP Miami, FL 33196

TITLE V ☐ Delete
NAME RODRIGUEZ, LUIS
STREET ADDRESS 3801 S. OCEAN DRIVE, STE. 15N
CITY-ST-ZIP HOLLYWOOD FL 33019

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

TITLE ST ☐ Delete
NAME LOPEZ, IRIS
STREET ADDRESS 3801 S. OCEAN DRIVE, STE. 15N
CITY-ST-ZIP HOLLYWOOD FL 33019

TITLE ST ☒ Change ☐ Addition
NAME Iris San Juan
STREET ADDRESS 9721 Hammocks Blvd #101
CITY-ST-ZIP Miami, FL 33196

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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)(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:

Luis C Rodriguez (UP) 05/01/02 954-5366138

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)