2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2002 8:00 am
Secretary of State
01-30-2002 90053 024 ***150.00

DOCUMENT # P00000105229

1. Entity Name
MOVIC ENTERPRISES INC.

Principal Place of Business	Mailing Address
4851 N.W. 183 STREET MIAMI FL 33055	4851 N.W. 183 STREET MIAMI FL 33055

DO NOT WRITE IN THIS SPACE

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 65-1060415 ☐ 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
OBOH, JOSEPHINE 4851 N.W. 183 STREET MIAMI FL 33055	Name Monica Osagie Street Address (P.O. Box Number is Not Acceptable) 16742 SW 36 Ct City Miramar FL Zip Code 33027

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 Monica Osagie Osagie President
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD IMADOJMU, JOSEPH 16742 S.W. 36 COURT MIRAMAR FL 33027	☒ Delete	PRESIDENT/CEO MONICA OSAGIE 16742 SW 36 CT MIRAMAR, FL 33027	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD OBOH, JOSEPHINE 4851 N.W. 183 STREET MIAMI FL 33055	☒ Delete	DIRECTOR JOSEPHINE OBOH 4851 NW 183RD ST MIAMI, FL 33055	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Albert	☐ Delete	DIRECTOR ALBERT EVBAYEKHA 4851 NW 183rd St, Miami FL 33055	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DIRECTOR TOM ODIKPA 1367 Brambow road Dr LAKELAND, FL Lakeland, FL 33807	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	DIRECTOR JOSEPH IMADOJEMU 4851 NW 183rd St MIAMI FLORIDA 33055	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E034 (9/01)

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 the address, and all shall be empowered.

SIGNATURE: Monica Osagie MONICA Osagie 01/06/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #