2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2002 8:00 AM
Secretary of State

DOCUMENT# P00000111094

Entity Name: PARTY DELIGHT ENTERTAINMENT, INC.

Current Principal Place of Business:

1204 W WATERS AVE
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

1204 W WATERS AVE
TAMPA, FL 33604

New Mailing Address:

FEI Number: 91-2102420 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DORING, LISA
1204 W WATERS AVE
TAMPA, FL 33604

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: DORING, LISA
Address: 5117 SPRINGWOOD DRIVE
City-St-Zip: TAMPA, FL 33624

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VP ( ) Change (X) Addition
Name: COLLERA, MANUEL R
Address: 1206 W WATERS AVE
City-St-Zip: TAMPA, FL 33604 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MANUEL COLLERA VP 04/24/2002

Electronic Signature of Signing Officer or Director — Date