2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT

P00000117846

1. Entity Name

TEARDROPFILMS ENTERTAINMENT CORPORATION



Mailing Address Principal Place of Business 9009 UNIVERSITY PARKWAY #78 9009 UNIVERSITY PARKWAY #78 PENSACOLA FL 32514 PENSACOLA FL 32514 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 59-3689976 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent AMERON PHOENIX ROWE ROWE, CAMERON F Street Address (P.O. Box Number is Not Acceptable) 3913 PISA DR APT P7 3005 9009 UNIVERSITY PRWY # PANAMA CITY FL 32405 ENSACOLA 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. LICE-CHAIRMAN & PRESIDENT 4-25-2003 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE' 15 \$150.00 9. Election Campaign Financing \$5.00 May Be

After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State

Trust Fund Contribution.

FILED

Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90204 038 ***150.00

Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 GOFFICERS AND DIRECTORS 11. CHAIRWOMAN TITLE Delete TITLE FELECIA CONSTANCE ROWE ROWE, FELECIA C NAME NAME 9009 UNIVERSITY PRWY #78 3913 PISA DR APT P7 STREET ADDRESS STREET ADDRESS PENSACOLA, FL 32514 PANAMA CITY FL 32405 CITY-ST-ZIP CITY-ST-7IP VICE-CHAIRMAN & PRESIDENT Change TITLE Delete TITLE CAMERON PHOENIX ROWE NAME NAME ROWE, CAMERON F 9009 UNIVERSITY PKWY #78 STREET ADDRESS STREET ADDRESS 3913 PISA DR APT P7 CITY-ST-ZIP PENSACOLA, FL 32514 CITY-ST-ZIP PANAMA CITY FL 32405 _ Change ☐ Addition TITLE TITLE CE₀ 🗶 Delete 🔑 RACHEL ALICE HUNTER NAME HUNTER, RACHEL A NAME 9009 UNIVERSITY PHWY #78 STREET ADDRESS STREET ADDRESS 3913 PISA DR APT P 7 PENSACOLA . FL CITY-ST-ZIP CITY-ST-7IP PANAMA CITY FL 32405 ☐ Delete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this fitting 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 export is true and accurate any that my signature shall have the same legal effect as if made under oath; that if am an officer or director of the corporation or the receiver or trustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

HEREOU SHOTHINK KOWS

CR2E034 (10/02)