## 2002 UNIFORM BUSINESS REPORT (UBR)

## Aug 13, 2002 8:00 am Secretary of State D@CUMENT# P01000014851 08-13-2002 90222 015 \*\*\*150.00 NICHOLAS TAYLOR PRODUCTIONS, INC. Principal Place of Business Mailing Address 1400 N.W. 13TH ST., APT. 32 1400 N.W. 13TH ST., APT, 32 **BOCA RATON FL 33486 BOCA RATON FL 33486** 2. Principal Place of Business 3. Mailing Address 1900 NW 13 1400 NW Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE #37 City & State City & State 4. FEI Number Applied For RATER o E 65-1125360 Not Applicable Country Country \$8.75 Additional 486 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name POWELL, BRANDINE E ESQ. Street Address (P.O. Box Number is Not Acceptable) 4600 W. COMMERCIAL BLVD., STE. 6 FT. LAUDERDALE FL 33319 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 age **SIGNATURE** me of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE Delete TITLE ☐ Change ☐ Addition RAVA, NICHOLAS NAME NAME STREET ADDRESS 1400 N.W. 13TH ST., APT. 32 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33486** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZÎP-TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP TITI F ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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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:

CITY-ST-ZIP

**FILED** 

1400 NW 13TH STREET, 422 BOCA RATON, FL 33486 (561) 361-1086