

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000027144

1. Entity Name
SUN UP ENTERTAINMENT, INC.

Principal Place of Business
280 NE 78TH ST.
MIAMI FL 33138

Mailing Address
280 NE 78TH ST.
MIAMI FL 33138

2. Principal Place of Business
280 NE 78 ST.

3. Mailing Address
280 NE 78 ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami FL
Zip 33138

City & State
Miami FL
Zip 33138

4. FEI Number
03-0382474

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

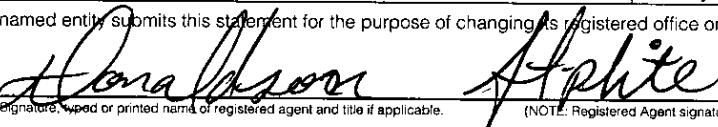
ST-PLITE, DONALDSON
280 NE 78TH ST.
MIAMI FL 33138

7. Name and Address of New Registered Agent

Name St-Plite, Donaldson
Street Address (P.O. Box Number is Not Acceptable)
280 NE 78 ST

City Miami FL Zip Code 33138

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.)

(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 CEO
NAME Donaldson ST-PLITE
STREET ADDRESS 280 NE 78 ST
CITY-ST-ZIP Miami, FL 33138

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
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CITY-ST-ZIP

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Change Addition

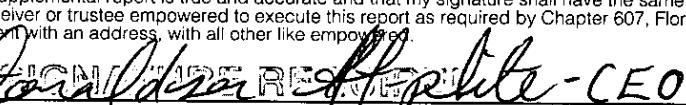
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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 empowerments.

SIGNATURE: 
ST-PLITE - CEO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305)528-7839
Daytime Phone #

CR2E034 (9/01)

20020201