

FILED
Sep 19, 2002 8:00 am
Secretary of State

08-25-2002 90197 042 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000027693

1. Entity Name
NEW PERSPECTIVE MEDIA, INC.

Principal Place of Business
1401 BRICKELL AVE., STE. 350
MIAMI FL 33131

Mailing Address
1401 BRICKELL AVE., STE. 350
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

| | | | | | | | |
|--------------------------------|---------|---------------------|---------|---|--|---|--|
| 2. Principal Place of Business | | 3. Mailing Address | | 4. FEI Number 05-1102527 | | Applied For <input type="checkbox"/> | Not Applicable <input type="checkbox"/> |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| City & State | | City & State | | | | | |
| Zip | Country | Zip | Country | | | | |

| | | | |
|---|--|--|--|
| 6. Name and Address of Current Registered Agent | | 7. Name and Address of New Registered Agent | |
| LITTLE, GREG 1401 BRICKELL AVE., STE. 350 MIAMI FL 33131 | | Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) 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 \$550.00**
After September 13, 2002 Fee will be \$750.00
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 | D COLEMAN, DONALD 26555 EVERGREEN, STE. 1800 SOUTHFIELD MI 48076 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BENNINGTON, RICHARD 26555 EVERGREEN, STE. 1800 SOUTHFIELD MI 48076 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D LITTLE, GREG 1401 BRICKELL AVE., STE. 350 MIAMI FL 33131 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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 empowered.

SIGNATURE: *[Signature]* **REGISTRATION REQUIRED**

8/15/02

248 223 8963

CR2E034 (4/02)



NEW PERSPECTIVES
M E D I A

Atchamont

1401 Brickell Avenue, Suite 350 Miami, FL 33131
ph. 305.379.5882 fax. 305.358.7447

*#P01000027693
99720*

RECEIVED

AUG 15 2002

KENDRA GLOVER

08/15/02

To Whom It May Concern:

This is to notify you that New Perspectives Media did not receive the prior notice of the Uniform Business Report and requests that the late fee be waived.

Sincerely,


Greg Little
CFO