

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

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90666 019 ***150.00

DOCUMENT # P01000046568
1. Entity Name
Pit Boss MEDIA, INC.

DO NOT WRITE IN THIS SPACE

B0064432

2. Principal Place of Business 5240 N.E. 6 AVE.		3. Mailing Address 5240 N.E. 6 AVE.	
Suite, Apt. #, etc. 26 H		Suite, Apt. #, etc. 26 H	
City & State FORT LAUDERDALE, FL		City & State FORT LAUDERDALE, FL	
Zip 33334	Country USA	Zip 33334	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3719122		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		

DO NOT WRITE IN THIS SPACE	7. Name and Address of Current Registered Agent	
	Name Ty THORNTON	
	Street Address (P.O. Box Number is Not Acceptable) 5240 N.E. 6 AVE. #26H	
	City FORT LAUDERDALE, FL	Zip Code 33334

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  **Ty THORNTON** **president** **3-26-02**
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)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director, President, Secretary Ty THORNTON 5240 N.E. 6 AVE. 26H FORT LAUDERDALE, FL 33334	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **3-26-02 954-776-6416**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)