

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91506 002 ***158.75

DOCUMENT # P01000047837

1. Entity Name
THIRD EYE PRODUCTIONS, INC.

| | |
|--|--|
| Principal Place of Business 15327 N W 60TH AVENUE SUITE 240 MIAMI LAKES FL 33014 | Mailing Address 15327 N W 60TH AVENUE SUITE 240 MIAMI LAKES FL 33014 |
|--|--|



DO NOT WRITE IN THIS SPACE

| | | | | | | | |
|--------------------------------|---------|---------------------|---------|--|--|-------------------------------|--|
| 2. Principal Place of Business | | 3. Mailing Address | | 4. FEI Number 65-1156677 | | Applied For Not Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required | | | |
| City & State | | City & State | | | | | |
| Zip | Country | Zip | Country | | | | |

| | | | | | | | |
|---|--|--|--|--|--|--|--|
| 6. Name and Address of Current Registered Agent REY, ROMINA 15327 N W 60TH AVENUE SUITE 240 MIAMI LAKES FL 33014 | | | | 7. Name and Address of New Registered Agent 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.
 SIGNATURE ROMINA REY PTD (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) <input type="checkbox"/> | 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. <input type="checkbox"/> \$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 | PTD REY, ROMINA 15327 N W 60TH AVENUE MIAMI LAKES FL 33014 <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 | VD VALDEZ, JUAN C 15327 N W 60TH AVENUE MIAMI LAKES FL 33014 <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 | SD VALDEZ, RICARDO I 15327 N W 60TH AVENUE MIAMI LAKES FL 33014 <input type="checkbox"/> Delete | | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D VALDEZ, RICARDO I 15327 NW 60TH AVE MIAMI LAKES, FL 33014 | <input checked="" 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 | SD REY, MORGANA M. 15327 NW 60TH AVE MIAMI LAKES FL 33014 | <input type="checkbox"/> Change <input checked="" 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 I'm empowered.

SIGNATURE: ROMINA REY **4/26/02** **305)825-7616**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment 7101149

May 3, 2002

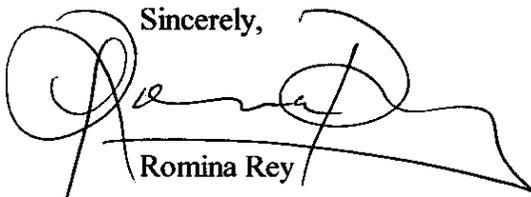
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Reference: THIRD EYE PRODUCTIONS, INC.
Doc #: P01000047837

Gentlemen,

Enclosed is the Annual Report in the original envelope in which it was mailed timely. I forgot to place a stamp on the envelope and it was returned to me. I just received it today. Please allow the Annual Report to be processed as if it was filed timely. Thank you for your cooperation.

Sincerely,


Romina Rey