

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State
 05-27-2002 90489 039 ***150.00

DOCUMENT # P01000054046

1. Entity Name
AIEL STUDIOS, INC.

Principal Place of Business

**1840 CORAL WAY
 4TH FLOOR
 MIAMI FL 33145**

Mailing Address

~~POST OFFICE BOX 978934
 MIAMI FL 33147-8934~~

B0116362



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

9010 S.W. 137th Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite No. 113

City & State

City & State

MIAMI FL.

4. FEI Number

65-1109837

Applied For

Not Applicable

Zip

Country

Zip

Country

33186

US

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~**SPIEGEL & UTRERA, P.A.**~~

~~**340 ALMERIA AVENUE**~~

~~**CORAL GABLES FL 33134**~~

Name

GERMAN PENA

Street Address (P.O. Box Number is Not Acceptable)

9010 S.W. 137th Ave.

Suite 113

City

Miami

FL

Zip Code

33186

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

German Pena

GERMAN PENA

4/30/02

(Signature, typed or printed name of registered agent and fee is 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 ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**PSTD
 EISENSTEIN, ALAN
 1840 CORAL WAY 4TH FLOOR
 MIAMI FL 33145**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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 CITY-ST-ZIP

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: *Alan Eisenstein*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN EISTEIN

4/30/02

Date

Daytime Phone #

CR2E034 (9/01)