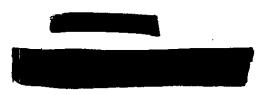
2002 UNIFORM BUSINESS REPORT (UBR) P01000114145 DOCUMENT# AQUATAT INTERNATIONAL PRODUCTIONS, INC. Principal Place of Business Mailino Address

FILED Oct 03, 2002 8:00 am Secretary of State

09-19-2002 90154 004 ***750.00



9765 SOUTHBROOK DRIVE APARTMENT 2607 JACKSONVILLE FL 32256 2. Principal Place of Business			9765 SQUTHBROOK DRIVE APARTMENT 2607 JACKSONVILLE FL 32256 3. Malling Address											
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE							
City & State			City & State	· · · · ·		4. FEI Numb	er 375	8431	/		pplied For lot Applicable	,		
Zip Country			Zip Country				5. Certificate of Status Desired							
	6. Name a	and Address of Current Re	egistered Agent				7. Name and	Address o	1 New Reg	Istered Ac	jent	,		
			_Name				·	-			7			
200 WEST	erg, richari I forsyth s			Street Ad	ldress (P.0	D. Box Numb	er is Not Ac	ceptable)				1		
SUITE 120]									
JACKSON	MILLE FL 322	02			City		·			FL	Zip Cod	le	1	
8. The above the obligat	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	Signature, typed or	printed name of registered agent and	f title if applicable. (NOTE:	Registere	d Agent signatur	a raquired wh	en reinstating)	7		DATE				
Tax filling		le to satisty its Intangible delects to do so.	FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$7 Make Check Payable to Department of			\$750.00	l l	ection Camp ust Fund Co	¥	cing 🗀	\$5.0 Added	00 May Be d to Fees	1	
11.		OFFICERS AND DI	RECTORS	12.			ADDITIONS	CHANGES	TO OFFICE	AS AND D	DIRECTOR	S IN 11	1	
NAME		/IS HBROOK DRIVE, #2607 LLE FL 32256	☐ Delate							1	Change	☐ Addition	CR2E034 (4/02)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NITA RSITY CLUB BLVD. N. 4 LLE FL 32256	Ø 0elete ₱304					•		ſ	Change	☐ Addition	SRS	
NAME STREET ADDRESS CITY - ST-ZIP		.D ROAD OOD, HERTS WD61UJ (UK Delete			· • • • • • • • • • • • • • • • • • • •		• • • •		. — → . * ÷	☐ Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PROTECTION 976550 JACKSON	DEAN NTH BROOK DRH VILLE, FL 382	□ Delete 2607 -56		ET ADDRESS ST-ZIP					C	Change	Addition		
TITLE NAME STREET ADORESS CITY-ST-ZIP			☐ Delete		ł] Change	☐ Addition		
TITLE NAME STREET ADDRESS CITY-SI-ZIP			☐ Delete	CITY-	T ADORESS ST-ZIP						Change	☐ Addition		
13. I hereby o	ertify that the in	iformation supplied with this	s filing does not qualify for the	he exem	nption stated	in Section	n 119.07(3)(i), Florida Sta	atules. I furt	her certify	that the inf	formation	ĺ	

upler retailed to the interest and that my signature shall have the same legal effect as it made under oath; that I am an officer or director yet 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 it with an address, with all other like empowered.