## **2002 UNIFORM BUSINESS REPORT (UBR)**

## Sep 09, 2002 8:00 am Secretary of State P01000119982 **DOCUMENT #** 1. Entity Name 09-09-2002 90020 024 \*\*\*150.00 DIGITAL KEY ENTERTAINMENT CORP. Principal Place of Business Mailing Address 17340 NW 63 AVE. 17340 NW 63 AVE. MIAMI FL 33015 **MIAMI FL 33015** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Numbe Applied For ✗ Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **BLANCO, PETER J** Street Address (P.O. Box Number is Not Acceptable) 17340 NW 63 AVE. **MIAMI FL 33015** City 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 title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Addition BLANCO, PETER J NAME NAME 17340 NW 63 AVE. STREET ADDRESS STREET ADDRESS MIAMI FL 33015 CITY-ST-ZIP CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP . Dolete JITLE. Ghange-NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP

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 accress, with all other like empowered.

**FILED** 

(305) 824-3557

Attendement

## *Memorandum*

To: Barbara Mitchell

Division of Corporations

P. O. Box 6327

Tallahassee, Fl. 32314

From: Mr. Peter Blanco

Digital Key Entertainment Corp

Date: 9/6/02

Re:

UBR/Late fee waiver. P01000119982

This letter serves as a request to waive the late fee on filing the UBR form. Until this first notice, I had no prior knowledge of a UBR form or any additional fees that I was responsible for, other than the initial fee incurred for starting my corporation. I here enclose a check for \$150.00 U.S. dollars as requested, as my original filing fee, and my UBR form. Please mail me any additional pertinent literature that may educate me in this subject matter. Thank you in advance for your cooperation. You may contact me at the following address or number.

Peter Blanco (305) 824-3557

17340 NW 63 AVE

Miami, Fl. 33015