2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UÉR

Mailing Address

868 108TH AVE N NAPLES FL 34108

3. Mailing Address

P02000003530 03 AUG -8 AM 9: 43

SECRETARY OF STATE FALLAHASSEE, FLORIDA

07/18/03 90083 003 \$150.00

DATE

Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For Not Applicable Country Country \$8.75 Additional Certificate of Status Desired Fee Required -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WANDERON, THOMAS Street Address (P.O. Box Number Is Not Acceptable) 868 106TH AVE N NAPLES FL 34108 Zip Code FL

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.

(NOTE: Recistered Agent signature required when reinstating)

SIGNATURE

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

AVENUE E PRODUCTIONS, INC.

1. Entity Name

868 106TH AVE N

NAPLES FL 34108

FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 Make Check Payable to Florida Department of State

.Signature, typed or printed name of registered agent and title it applicable

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE Change Addition TITLE ☐ Delete J. McGann Robert NAME NAME et J. Mc Gam 6987 Green Tree Drive STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 34108 Delete ☐ Addition MILE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change | Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3XI), 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 certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:X

CITY-ST-ZIP

TEO NAME OF SIGNING OFFICER OR DIRECTOR

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Tax, Accounting and Financial Associates, Inc.

Tuesday, July 29, 2003

Division of Corporations - Annual Reports Section Florida Department of State P.O. Box 6327 Tallahassee, FL 32314

RE.

Avenue E Productions, Inc.

P02000003530

Notice Dated: 7/22/03

We are the tax accountants and registered agent for the above named corporation and are in receipt of the notice referenced above. The 2nd 2003 UBR as sent out by the state was recently filed by the corporation.

Included with the remitted UBR and fee, was a request that the corporation be allowed to file its annual report with the 2003 filing fee of \$150 and a waiver of any late fees. The corporation did not receive the original 2003 Uniform Business Report form sent by the state and the officer of the corporation was unaware of it's requirement to file an annual report (2003 was the first year that an annual report was required of the corporation.)

We again seek leniency on behalf of the corporation with regard to the assessment of late filing fees.

Please advise the corporation and my office as the Registered Agent accordingly.

Thank you.

Very truly yours,

Thomas Wanderon, Registered Agent

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English Control

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