

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 04, 2003 8:00 am
Secretary of State

08-04-2003 90142 035 ***155.00

0131000 AV

DOCUMENT # P02000006271

1. Entity Name
3RD DEGREE BURNS FILMS, INC.



Principal Place of Business
7415 SOUTH A1A
SUITE 203
MELBOURNE BEACH FL 32951

Mailing Address
7415 SOUTH A1A
SUITE 203
MELBOURNE BEACH FL 32951



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

04-3587838

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

7. Name and Address of New Registered Agent

Name: Dr. Gary M. Berns
Street Address (P.O. Box Number is Not Acceptable): 7415 South Hwy. A1A #203
City: Melbourne Beach FL Zip Code: 32951

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]*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/05/03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☒

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD BERNS, GARY M 7415 SOUTH A1A, SUITE 203 MELBOURNE BEACH FL 32951	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
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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"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7-5-2003 321 7331958

CR2E034 (10/02)

Attachment

10110615
PO200006271

3rd Degree Burns Films, Inc.
7415 South Hwy. A1A, Suite 203
Melbourne Beach, Florida 32951
321-733-1958 Office
1-877-697-9443 Toll Free
321-952-0962 Fax
www.3rddegreeburns.net

July 15, 2003

Florida Department of State
Secretary of State
Division of Corporations
~~P.O. Box 6327~~
Tallahassee, Florida 32314

To Whom It May Concern:


I am writing to request some consideration for the processing of the attached Uniform Business Report. As per our phone conversation with your office, we did not receive the form to file on time as it went to our registered agent, who neglected to inform us of the timely need to file. We are respectfully requesting a waiver of the \$400.00 penalty fee, in that we did not receive the materials to fill out this form on time from the registered agent.

For this reason, we are changing the registered agent in block #7 to the president of the corporation, Dr. Gary M. Berns, and are hereby requesting all future communications to be sent to the new registered agent named herein.

I am enclosing a check in the amount of \$155.00, which is the \$150.00 filing fee, plus \$5.00 for the election fund. Please advise me if this will or will not be adequate in the processing of the enclosed report.

Thank you for your time, consideration and attention in this matter.

Sincerely,



Dr. Gary M. Berns
President and new registered agent