2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 29, 2003 8:00 am Secretary of State

DOCUMENT # P0200007181 1. Entity Name VIBE PRODUCTIONS INC.				04-10-2003 90140 004 ***150.00	
3265 ST JAMES DR 3265 ST JAM		Mailing Address 3265 ST JAMES DR BOCA RATON FL 33434			-
Principal Place of Business Mailing Address			- I THE BEHALM THE BOWN THEN BEADS WENT OF THE BOTT POLITY LIBER FEREN WANT HERE		
Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
City & State		City & State		4. FEI Number Applied For Not Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current Re	gistered Agent		7. Name and Address of New Registered Agent	
			Name		
BROWN, ROGER 3265 ST JAMES DR			Street Address	(P.O. Box Number is Not Acceptable)	
BOCA RATON FL 33434					
			City	Zip Code	
 The above named entity submits this statement for the purpose of changing its registered office or register the obligations of registered agent. 				ered agent, or both, in the State of Fiorida. I am familiar with, and accept	
SIGNATURE		<u> </u>			
	Signature, typed or printed name of registered agent and I	tie it applicable. (NOT	E: Registered Agent signature require	d when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State			2 . 5 . 2	8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees	
10.	OFFICERS AND DIF		- 11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
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indicated on this report or supplied with this iming does not quality for the exemption stated in Section 119,07(3)(0). Florida Statutes, I further certify that the information indicated on this report or suppliemental 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, withfull other like empowered.

SIGNATURE:

SIGNATURY AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/0/03 Date 56/-367-7997 Daytime Phone #