FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 90205 038 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000024238

1. Entity Name
SHANGRI-LA STUDIOS, INC.

Principal Place of Business
724 N. OLEANDER AVENUE
DAYTONA BEACH, FL 32118

Mailing Address
724 N. OLEANDER AVENUE
DAYTONA BEACH, FL 32118

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

[X] CHECK HERE IF MAKING CHANGES

4. FEI Number 010631L3 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
WILSON, LISA
2111 MITCHELL LANE
DAYTONA BCH, FL 32124

7. Name and Address of New Registered Agent
Name: LISA WILSON
Street Address (P.O. Box Number is Not Acceptable): 724 N. Oleander Ave Apt F
City: Daytona Beach FL Zip Code 32118

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: Lisa Wilson 4/30/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required 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

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	DP SICA, ANTHONY 2111 MITCHELL LANE DAYTONA BCH, FL 32124	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP ANTHONY SICA 724 N. Oleander Apt F Daytona Beach, Fl. 32118	[X] Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VST WILSON, LISA 2111 MITCHELL LANE DAYTONA BCH, FL 32124	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VST LISA WILSON 724 N. Oleander Ave Apt F. Daytona Beach Fl 32118	[X] Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Lisa Wilson LISA WILSON 4/30/03 386-846-7298
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)