

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

0095162 AV

**DOCUMENT # P02000044905**

1. Entity Name  
**GATE VII CREATIVE STUDIOS, INC.**



04-21-2003 91066 038 \*\*\*150.00

Principal Place of Business  
**284 PARK AVE. NORTH, SUITE B  
WINTER PARK FL 32789**

Mailing Address  
**284 PARK AVE. NORTH, SUITE B  
WINTER PARK FL 32789**

2. Principal Place of Business  
**6001 Vineland Rd.**

3. Mailing Address  
**6001 Vineland Rd**

Suite, Apt. #, etc.  
**Suite 117**

Suite, Apt. #, etc.  
**Suite 117**

City & State  
**Orlando, FL**

City & State  
**Orlando, FL**

Zip  
**32819**

Country  
**Orange**

Zip  
**32819**

Country  
**Orange**

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number  
**02-0590034**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCLEOD, W. EDWARD  
284 PARK AVE. NORTH, SUITE B  
WINTER PARK FL 32789**

Name **JEFFREY B. FRIEDMAN**

Street Address (P.O. Box Number is Not Acceptable)  
**6001 VINELAND RD - SUITE 117**

City **ORLANDO**

FL

Zip Code **32819**

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 **Jeffrey B. Friedman** **JEFFREY B. FRIEDMAN**

**04/14/03**

**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 **D** ☐ Delete  
NAME **BRESLIN, DONNA**  
STREET ADDRESS **284 PARK AVE. NORTH, SUITE B**  
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **D** ☒ Change ☐ Addition  
NAME **BRESLIN, DONNA**  
STREET ADDRESS **1119 ENGLISH GARDEN LANE**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
NAME **FRIEDMAN, JEFFREY B.**  
STREET ADDRESS **7948 SNOWBERRY CIRCLE**  
CITY-ST-ZIP **ORLANDO, FL 32819**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
NAME **CRIGGER, DAVID**  
STREET ADDRESS **6451 PICCADILLY LANE**  
CITY-ST-ZIP **ORLANDO, FL 32835**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition  
NAME **BRESLIN, THOMAS**  
STREET ADDRESS **1119 ENGLISH GARDEN LANE**  
CITY-ST-ZIP **WINTER GARDEN, FL 34787**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: **Jeffrey B. Friedman** **JEFFREY B. FRIEDMAN**

**4/14/03**

**407-398-0777**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)