**FILED** 

Aug 18, 2003 8:00 am Secretary of State

08-18-2003 90171 028 \*\*\*150.00

# 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT #

P02000058404

1. Entity Name

SOUTHSOUL PRODUCTIONS, INC.

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Principal Place of Business Mailing Address 9450 ATLANTIC STREET 9450 ATLANTIC STREET MIRAMAR FL 33025 MIRAMAR FL 33025 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 16-1634948 Not Applicable Zip Zip Country Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KANDEKORE, KWAME Street Address (P.O. Box Number is Not Acceptable) 9450 ATLANTIC STREET MIRAMAR FL 33025 Zip Code City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be After September 10, 2003 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition TITLE ☐ Delete TITLE Change KANDEKORE, KWAME NAME NAME 9450 ATLANTIC STREET STREET ADDRESS STREET ADDRESS MIRAMAR FL 33025 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition FORTE, CONROY JR. NAME NAME 9450 ATLANTIC STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIRAMAR FL 33025 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME JACKSON, TYRONE NAME STREET ADDRESS 9450 ATLANTIC STREET STREET ADDRÉSS CITY-ST-ZIP MIRAMAR FL 33025 CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



### SOUTHSOUL PRODUCTIONS, INC.

9450 ATLANTIC STREET MIRAMAR, FL 33025 Phone: (954) 436-5467 Fax: (305) 654-2932 E-mail: miamikor@msn.com

# PO2000058404

August 15, 2003

Florida Department of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Dear Sirs,

Re: Late filing of Business Report

We have received our notice of intent to dissolve the corporation unless the report is filed within 60 days ending September 10, 2003.

Pleas be advised that we did not receive your first notice of the filing deadline and because we are a new corporation we were not aware that the filing was late.

Accordingly we ask that you be kind enough to waive the late fee and accept the enclosed report as timely filed and our filing fee of \$150.

Yours truly

KWAME/KANDEKORE

Director