

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

09-10-2003 90060 038 ***150.00
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DOCUMENT # P02000061408

1. Entity Name
SUMO MEDIA CORPORATION



Principal Place of Business
PO BOX 530218
MIAMI FL 33153

Mailing Address
PO BOX 530218
MIAMI FL 33153

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT CHECK HERE IF MAKING CHANGES 03

4. FEI Number

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ALVAREZ, RENE
PO BOX 530218
MIAMI FL 33153

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00
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

TITLE P
NAME ALVAREZ, RENE
STREET ADDRESS 981 NE 113TH STREET
CITY-ST-ZIP MIAMI FL 33161

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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CITY-ST-ZIP

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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9.3.03

Date

305 895.6080

Daytime Phone

CR2E034 (4/03)

Sumo Media Corporation
PO Box 530218
Miami, FL 33153

To Whom it may concern,

I am requesting for a third time that the late fee be waived. As expressed in my last letter (attached), we sincerely had no idea of our obligation. We never received the notice.

If you need to ask any questions, please call me on my cell: 305.528.4326.

Thank you for your help in this matter.

Rene Alvarez
President