FILED 2003 FOR PROFIT CORPORATION Feb 10, 2003 8:00 am Secretary of State UNIFORM BUSINESS REPORT (UBR) P02000126143 DOCUMENT # 02-10-2003 90449 009 ***150.00 1. Entity Name TUDOR PRODUCTIONS, INC. Mailing Address Principal Place of Business 9200 S DADELAND BLVD #308 9200 S DADELAND BLVD #308 MIAMI FL 33156 MIAMI FL 33156 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For 4. FEI Number City & State City & State Not Applicable FOR APP. \$8.75 Additional Country Żip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HANAFOURDE, BRADLEY K Street Address (P.O. Box Number is Not Acceptable) 9200 S DADELAND BLVD #308 **MIAMI FL 33156** 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Addition Change □ Delete TITLE TITLE BORDO HAWAFOURDE NAME JAMAFPIRDE, BRADLEY K NAME DADELAND BLY STREET ADDRESS 9200 S 9200 S DADELAND BLVD #308 STREET ADDRESS 3 CITY-ST-7IP MIAMI FL 33156 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITI F Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information my signature shall have the same legal effect as if made under oath; that I am an officer or director as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filing does not qualify for indicated on this report or supplemental report is true and of the corporation or the receiver or trustee changed, or on an attachment with an

CITY-ST-7IP

SIGNATURE:

CITY-ST-7IP

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER

PRESIDENCE I CHANAFOURUS