

2004 FOR PROFIT CORPORATION ANNUAL REPORT

8/30/

FILED
Sep 27, 2004 8:00 am
Secretary of State

08-30-2004 90005 036 ***150.00

DOCUMENT # P03000002080

1. Entity Name
DOUBLE ACTION ENTERTAINMENT INC.



Principal Place of Business
PO BOX 170143
MIAMI, FL 33017

Mailing Address
PO BOX 170143
MIAMI, FL 33017



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08262004

Chg-P

CR2E034 (10/03)

4. FEI Number

75-3107988

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

FLEMING, AHMAD
1955 NW 192ND TR.
MIAMI, FL 33056

Name **AHMAD FLEMING**

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

2553 CHATEAU LN UNIT B

City **TALLAHASSEE**

FL

Zip Code **32311**

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 **AHMAD FLEMING PRES.**

Signature, typed or printed name of registered agent and toll if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

CORRECTION
FILE NOW!!! FEE IS \$50.00
Due by September 8, 2004

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 **PRESIDENT** ☐ Delete
NAME **AHMAD FLEMING**
STREET ADDRESS **2553 CHATEAU LANE UNIT B**
CITY-ST-ZIP **TALLAHASSEE, FL 32311**

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

TITLE **VICE PRESIDENT / TREASURER** ☐ Delete
NAME **RAYMOND MANDRELL**
STREET ADDRESS **1955 NW 192 TER.**
CITY-ST-ZIP **MIAMI, FL 33056**

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

TITLE **SECRETARY** ☐ Delete
NAME **NICOLE MOLTIMORE**
STREET ADDRESS **2428 JIM LEE ROAD**
CITY-ST-ZIP **TALLAHASSEE, FL 32301**

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

TITLE ☐ Delete
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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: **AHMAD FLEMING, PRES.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ahmad Fleming (850) 321-6398

Date Daytime Phone #



Attachment
06434145

P.O. Box 170143 Miami, Fl. 33017 ♦ (305) 519-6979
Web: WWW.DOUBLEACTIONS.COM ♦ Email: Info@DoubleActions.com

September 24, 2004

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Subject: Please wave the late fee for Double Action Entertainment, Inc.

Reference Number: P03000002080

Dear Glenda E. Hood,

We at Double Action Entertainment, Inc. filed our annual report but we did not receive any notification about the late penalty charge. We tried to process the information online but downloaded an entirely different form. We apologize for any confusion and would like to ask you to please wave the late fee assessed towards our corporation. Thank you for taking our request in consideration.

Sincerely,

Ahmad Fleming
Double Action Entertainment, Inc.

"Double Action: A Whole 'Nother Level!!"