

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90341 048 ***150.00

DOCUMENT # P03000100971

1. Entity Name
FORT FILMS, INC.



Principal Place of Business
**8873 FONTAINEBEAU BLVD 13103
MIAMI, FL 33172**

Mailing Address
**8873 FONTAINEBEAU BLVD 13103
MIAMI, FL 33172**

2. Principal Place of Business
1300 SW 122ND AVE

3. Mailing Address
1300 SW 122ND AVE

Suite, Apt. #, etc.
APT 416

Suite, Apt. #, etc.
APT 416

City & State
Miami FL

City & State
Miami FL

Zip
33184

Country

Zip
33184

Country

04212004

Chg-P

CR2E034 (10/03)

4. FEI Number
80-0076347

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GARCIA, MARIBELLA
8873 FONTAINEBEAU BLVD 13103
MIAMI, FL 33172**

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 obligation of registered agent.

SIGNATURE *Maribella Garcia*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **GARCIA, MARIBELLA**
STREET ADDRESS **8873 FONTAINEBEAU BLVD 13103**
CITY-ST-ZIP **MIAMI, FL 33172**

TITLE **DV** ☐ Delete
NAME **BARBY, MARILYN**
STREET ADDRESS **8873 FONTAINEBEAU BLVD 13103**
CITY-ST-ZIP **MIAMI, FL 33172**

TITLE **DS** ☐ Delete
NAME **BARBY, FRANCISCO J**
STREET ADDRESS **8873 FONTAINEBEAU BLVD 13103**
CITY-ST-ZIP **MIAMI, FL 33172**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Change ☐ Addition
NAME **Garcia Maribella**
STREET ADDRESS **1300 SW 122ND AVE**
CITY-ST-ZIP **APT 416 Miami FL 33184**

TITLE **DV** ☒ Change ☐ Addition
NAME **Barby, Marilyn**
STREET ADDRESS **1300 SW 122ND AVE**
CITY-ST-ZIP **APT 416 Miami FL 33184**

TITLE **DS** ☒ Change ☐ Addition
NAME **Barby, Francisco J**
STREET ADDRESS **1300 SW 122ND AVE**
CITY-ST-ZIP **APT 416 Miami FL 33184**

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

TITLE ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #