

2004 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90001 030 ***150.00

DOCUMENT # P03 000112329

1. Entity Name
 Ronald Entertainment, Inc.

Principal Place of Business 8639 N. Himes Ave #2713
 Tampa FL 33614
Mailing Address 8639 North Himes Ave #2713
 Tampa FL 33614

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 8639 N. Himes Ave
 Suite, Apt. #, etc. #2713
 City & State Tampa FL
 Zip 33614 Country

4. FEI Number 75-3132522
 Applied For Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

04066271



6. Name and Address of Current Registered Agent
 Ron Prevelige
 7036 West Hillsborough Ave
 Tampa FL 33634

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.

SIGNATURE _____
 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$160.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D.	Ron Prevelige	8639 North Himes Ave #2713	Tampa FL 33614	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS <td>CITY-ST-ZIP</td> <td><input type="checkbox"/> Change</td> <td><input type="checkbox"/> Addition</td>	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

13. 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 11 or Block 12 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

7/27/04

Date Daytime Phone #

CR2E034 (9/01)

Attachment

54066271

RONALD ENTERTAINMENT, INC.

8639 NORTH HIMES AVENUE #2713

TAMPA, FL 33614

TEL: (813) 789-8114

November 6, 2002

Annual Reports Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Annual Report
P03000112329

Dear Sir/madam:

In accordance with the advice from one of your staff, I am writing this letter along with the enclosed form of annual report and a check of \$ 150.00.

We did not receive the annual report and accordingly, we are submitting you a blank form. As you may note in the annual report form, please correct the mailing address.

The correct mailing address is as follows:

8639 NORTH HIMES AVENUE #2713, TAMPA, FL 33614

Inasmuch as we never received the form and even any notice at all, we hope you may waive any related penalties.

I am respectfully requesting you to accept our annual report in consideration of the reasonable cause described above.

I thank you very much for your consideration in this matter and please feel free to call me should you have any questions in this matter.

Very truly yours,



Kwon Dae Moon, President