FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) 2004

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90367 004 ***150.00

DOCUMENT # P03000119290

1. Entity Name
CRISTANCHO PRODUCTIONS, INC.

DO NOT WRITE IN THIS SPACE

44046131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1413 SUNSET HARBOR DR.	1413 SUNSET HARBOR DR
Suite, Apt. #, etc. UNIT 606	Suite, Apt. #, etc. UNIT 606
City & State MIAMI BEACH FL	City & State MIAMI BEACH FL
Zip 33139 Country USA	Zip 33139 Country USA

4. FEI Number 56-2409460 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CRISTANCHO, ANNETTE CAROLINA
Street Address (P.O. Box Number is Not Acceptable): 1413 SUNSET HARBOR DR.
UNIT 606
City: MIAMI BEACH FL Zip Code: 33139

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: _____ DATE: _____
Signature of registered agent and title if applicable (NOTE: Registered Agent signature required when changing)

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

January 1 - May 1, Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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	D
NAME	CRISTANCHO, ANNETTE CAROLINA
STREET ADDRESS	1413 SUNSET HARBOR DR. # 606
CITY-ST-ZIP	MIAMI BEACH, FL 33139

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 04/23/04 305-586-8193
NAME OF INDIVIDUAL (TYPED OR PRINTED) AND TITLE OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #