TO:850 617 6381

P.19/21

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850) 617-6380

From:

Account Name : CHARLES BACLET AND ASSOCIATES INC

Account Number : 120080000054

: (949) 955-9585

Phone Fax Number

: (800) 652-6504

562

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REGISTERED AGENT CHANGE

TRISTAR PICTURES, INC.

Certificate of Status	0
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2661 Executive Center Circle Tallahassee, FL 32301

COVER LETTER

TO: Amendment Division of	nt Section f Corporations	
SUBJECT:	TRI	STAR PICTURES, INC.
BUBBLE 1	(Name o	f Corporation)
DOCUMENT NU	MBER:	P26357
The enclosed State	ment of Change of Registered Of	fice/Agent and fee are submitted for filing.
Please return all co	rrespondence concerning this ma	tter to the following:
	-	•
	So	phy Keo
	(Name of	Contact Person)
	Charles Baciet	and Associates, Inc.
· •		(Company)
2030 Main Street, Suite 1030		
	(A	address)
•	Irvine	s, CA 92614
_	(City/Stat	and Zip Code)
For further informs	ation concerning this matter, plea	se call:
(Na	Sophy Keo	at (949) 955-9585 ext 21 (Area Code & Daytime Telephone Number)
	00 check made payable to the Dep	
	Mailing Address:	Street Address:
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building
	1,O, DOX 0247	Cinton building

Tallahassee, Fl. 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

1. The name of the corporation:	TRISTAR PICTURES, INC.
	10202 W. Washington Blvd., Culver City, CA 90232
3. The mailing address (if different):	
4. Date of incorporation/qualification:	10/6/1989 Document number: P26357
5. The name and street address of the cur Florida Department of State:	rrent registered agent and registered office on file with the
The Pre	entice-Hall Corporation System, Inc.
	1201 Hayes St., Ste 105
•	Tallahassee, FL 32301-2525
6. The name and street address of the new (if changed):	w registered agent (if changed) and /or registered office
	NRAI Services, Inc.
	31 Executive Park Drive, Suite 4
(P ()	Weston, FL 33331
The street address of its registered offic as changed will be identical.	ce and the street address of the business office of its registered agent,
Such change was authorized by resolut authorized by the board, or the corpora	tion duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.
Signature of an officer or director)	Steven Gofman, Assistant Secretary (Printed of typid name and title)
I hereby accept the appointment as reg I further agree to comply with the prov	gistered agent and agree to act in this capacity, visions of all statutes relative to the proper and complete performance ad accept the obligation of my position as registered agent. Or, if this ct a change in the registered office address, I hereby confirm that the ug of this change.
of my duties, and I am familiar with an document is being filed merely to reflec corporation has been notified in writing	ig of this change.
9LO:011	_
(Signature of Registered Agent)	7/3/2008
He : DIN	: NRAI Services, Inc