

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90054 039 ***150.00

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DOCUMENT # P92000015114

1. Entity Name
ENTERTAINMENT RESOURCE, INC.



Principal Place of Business
**290 BRYAN RD
DANIA FL 33004
US**

Mailing Address
**290 BRYAN RD
DANIA FL 33004
US**

11027451



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0378964**

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PARKER, RANDY
290 BRYAN RD.
DANIA BEACH FL 33004**

Name **MILLER, BRIAN**

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

290 BRYAN RD.

City **DANIA**

FL

Zip Code **33004**

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

BRIAN MILLER / TREAS.
(NOTE: Registered Agent signature required when reinstating)

4/28/03
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

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 **DVS** ☒ Delete
NAME **PARKER, RANDY**
STREET ADDRESS **1751 N.W. 107TH WAY**
CITY-ST-ZIP **PLANTATION FL 33322**

TITLE **DT** ☐ Change ☒ Addition
NAME **BRIAN MILLER**
STREET ADDRESS **3701 S. FLAGLER DR., D303**
CITY-ST-ZIP **WEST PALM BEACH, FL 33405**

TITLE **DV** ☒ Delete
NAME **MCGRUDER, SHAWN**
STREET ADDRESS **225 RUGBY RD**
CITY-ST-ZIP **WEST PALM BCH FL 33045**

TITLE **DPS** ☒ Change ☐ Addition
NAME **RANDY PARKER**
STREET ADDRESS **1751 NW 107TH WAY**
CITY-ST-ZIP **PLANTATION, FL 33322**

TITLE **DS** ☒ Delete
NAME **WARD, NATHAN**
STREET ADDRESS **209 BOVERLT RD**
CITY-ST-ZIP **WEST PALM BEACH FL 33405**

TITLE **DV** ☐ Change ☒ Addition
NAME **JAMES HAPPEL**
STREET ADDRESS **941 PARK AVENUE**
CITY-ST-ZIP **NEW YORK, NY 10028**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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
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:

Brian Miller
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN MILLER 4/28/03 954-925-7799
Date Daytime Phone #

CR2E034 (10/02)