

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000053346

BROADWAY MULTIMEDIA, INC.

FILED

01 APR 23 PM 12:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Principal Place of Business		Mailing Address	
351 ALTARA AVE. SUITE B CORAL GABLES FL 33146		351 ALTARA AVE. SUITE B CORAL GABLES FL 33146-1423	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



DO NOT WRITE IN THESE SPACES

4. FEI Number	65-0435163	Applied For	<input type="checkbox"/>
5. Certificate of Status Designated		\$8.75 Additional Fee Required	<input type="checkbox"/>

6. Name and Address of Current Registered Agent

HEGE, O. KENDALL  
351 ALTARA AVE.  
SUITE B  
CORAL GABLES FL 33146

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

9. This corporation is capable to satisfy its obligations (See instructions on back)  FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State

10. Election Campaign Contribution  \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

11a	HEGE, O. KENDALL	<input type="checkbox"/> Delete
11b	351 ALTARA AVE., SUITE B	
11c	CORAL GABLES FL 33146	
11d		<input type="checkbox"/> Delete
11e		
11f		<input type="checkbox"/> Delete
11g		
11h		<input type="checkbox"/> Delete
11i		
11j		<input type="checkbox"/> Delete
11k		

12. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (SEE INSTRUCTIONS)

12a	MATTHEW A. HEGE VICE PRESIDENT	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12b	351 ALTARA AVE.	
12c	CORAL GABLES, FL 33146	
12d	300004195099-0	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12e	-05/11/01--01019--029	
12f	****150.00 ****150.00	
12g	LS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12h		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12i		
12j		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12k		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 143.07(3)(g), 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 of this corporation 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 life empowers.

SIGNATURE: *[Signature]* President 4/19/2001 305 441-1231