2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000085163

Country

6. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J. SPIEGEL CHRTRD

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

1. Entity Name

MILEMARKER PRODUCTION, INC.

Principal Place of Business 912 SOUTH SILVER CIRCLE KEY LARGO FL 33037

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Mailing Address

3. Mailing Address

Suite, Apt. #, etc.

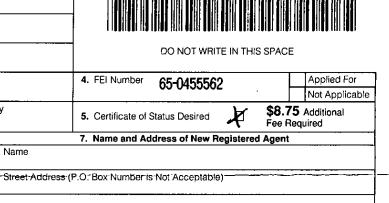
City & State

Zip

912 SOUTH SILVER CIRCLE KEY LARGO FL 33037

FILED Apr 16, 2001 8:00 am Secretary of State

04-16-2001 90279 019 ***158.75



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

343 ALMERIA AVENUE **CORAL GABLES FL 33134**

> FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State

Country

Name

(NOTE: Registered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Zip Code

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. **CSP** ☐ Addition TITLE ☐ Delete GLENNON, LOIS F. NAME STREET ADDRESS STREET ADDRESS 912 SOUTH SILVER CIRCLE CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 ☐ Change ☐ Addition TITLE ☐ Delete TITLE GLENNON, THOMAS NAME NAME STREET ADDRESS STREET ADDRESS 912 SOUTH SILVER CIRCLE CITY-ST-ZIP CITY-ST-ZIP KEY LARGO FL 33037 TITLE □ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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.

Lois F. Glennon 3/12/01 305-852-3554