Sent By: ; 936 273 5551; Apr-30-

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91160 027 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000006030

1. Entity Name: Video Tyme Inc

DO NOT WRITE IN THIS SPACE

90130074

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2. Principal Place of Business: 6005 SE Hwy 301	3. Mailing Address: P O Box 158
Suite, Apt. #, etc.: #105	Suite, Apt. #, etc.
City & State: Hawthorne FL	City & State: Hawthorne FL
Zip: 32640 Country	Zip: 32640 Country

4. FEI Number: 59-3225040 — 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: William Carlton
- Street Address (P.O. Box Number is Not Acceptable): 7005 SE 216 Terrace
- City: Hawthorne FL Zip Code: 32640

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

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

Due by May 1 — Fee is $150.00; After May 1 — Fee is $550.00; 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	NAME	STREET ADDRESS	CITY-ST-ZIP
President	William Carlton		Hawthorne FL
Sec. Treas	Barbara Carlton		Hawthorne FL

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CR2E034B (12/01)

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: Barbara M. Carlton — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/30/03 Daytime Phone #: (352 481244)