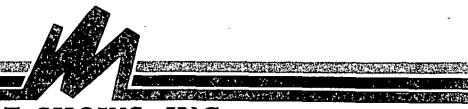
Daytime Phone #

2003 FOR PROFIT CORPORATION

SIGNATURE:

_ ÷ UN	IFORM BUSIN	ESS REPOR	T (UBR)			
DOCUMENT # P95000020855 1. Entity Name WADE SHOWS INCORPORATED				03 SEF	FILED '-2 PM 3:10	
Principal Place of Business 16958 US 41 S. SPRINGHILL FL 34610		Mailing Address 16958 US 41 S. SPRINGHILL FL 34610	TOO WE IS	TALLAH.	IARY OF STATE ASSEE, FLORIDA	
Principal Place of Business Address Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 59-3308580	Applied For Not Applicable	
Zip	Country	Žip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Curren	t Registered Agent		7. Name and Address of New Registered	Agent	
Name						
KNOWLTON, HORACE A IV 442 W. KENNEDY BLVD.				Address (P.O. Box Number is Not Acceptable)		
SUITE 28						
TAMPA FL 33606			City		Zip Code	
			City	FL ""		
the obligate SIGNATURE	named entity submits this statement fi fions of registered agent.	or the purpose of changing its	registered office or regist	ered agent, or both, in the State of Florida. I am	familiar with, and accept	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003-Fee will be \$750 Payable to Florida Department of			9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 11	
TITLE	D	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME	ZAITSHIK, FRANK		NAME			
STREET ADDRESS CITY-ST-ZIP	16958 US 41 S. SPRINGHILL FL 34610		STREET ADDRESS CITY-ST-ZIP	CAAA>>>		
TITLE NAME	D ZAITSHIK, MELISSA	☐ Delete	TITLE NAME	5000227061 09/02/0301039015	** 150 00 Addition	
STREET ADDRESS	16958 US 41 S.		STREET ADDRESS		!	
CITY-ST-ZIP	SPRINGHILL FL 34610		CITY-ST-ZIP			
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name Street address			NAME STREET ADDRESS			
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NAME			NAME			
STREET ADDRESS			STREET ADDRESS		ļ	
CITY-ST-ZIP		Later Control of the	CITY-ST-ZIP			
indicated of the corp	on this report or supplemental report is	s true and accurate and that no cowered to execute this report	ny signature shall have the	ection 119.07(3)(i), Fiorida Statutes. I further ce same legal effect as if made under oath; that I 17, Florida Statutes; and that my name appears i	am an officer or director. I	



WADE SHOWS, INC.

100 Quality Amusement Rides

Sunday, 8/24/03

Dear Mr. Kassees,

As we are a traveling carnival, we often have trouble obtaining our mail. We were operating in Texas all last winter, and did not receive any of the first notices of the Uniform Business Report forms for our four Florida corporations.

Thank you for your assistance and consideration.

Sincerely,

Michael E. Morrison

Finance Manager