

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000036762

1. Entity Name

FRANKENEGG PRODUCTIONS, INC.

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90280 046 ***150.00

Principal Place of Business

2453 WHISPERING MAPLE DR.
ORLANDO FL 32837

Mailing Address

2453 WHISPERING MAPLE DR.
ORLANDO FL 32837

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3443149

Applied For:

Not Applicable

Zip

Country

CURRENT REGISTERED AGENT

THIS IS JUST

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of

7. Name and Address of New Registered Agent

WHITACRE, WILLIAM L. ESQ.
~~47 S. MAGNOLIA AVE.~~
~~ORLANDO FL 32801~~

*A CHANGE OF
ADDRESS.*

Name

SAME

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

1000 UNIVERSAL STUDIO PLAZA

BLDG 22A SUITE 247

City

ORLANDO

Zip Code

32819

8. The above named entity swears this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *WHITACRE, WILLIAM L. ESQ.*

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

(NOTE: Registered Agent signature required when re-appointing)

4/19/01

DATE

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

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$650.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
PT	TANTALO, PATRICK A	2453 WHISPERING MAPLE DR.	ORLANDO FL				
VS	ORSOLINA, TANTALO	2453 WHISPERING MAPLE DR	ORLANDO FL 32837	VP	JAMES KING JR.	4142 FIREWATER CT	ORLANDO FL 32829

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Patrick A. Tantalio*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-19-01

DATE

407-856-7543

PHONE NUMBER

CR2E034 (10/00)