


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P95000058776 1. Entity Name DEBCO PRODUCTIONS, INC.	
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FILED
05 APR 25 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1840 Southwest 22nd Street Suite, Apt. #, etc. Suite # 4-192 City & State Miami, Florida Zip 33145 Country USA	3. Mailing Address 1840 Southwest 22nd Street Suite, Apt. #, etc. Suite # 4-192 City & State Miami, Florida Zip 33145 Country USA
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DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3326031	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Spiegel & Utrera, P.A.
Street Address (P.O. Box Number is Not Acceptable) 1840 Coral Way, 4th Floor City Miami FL Zip Code 33145

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	SDC Jones, Barbara 8455 Hwy JJ Mountain Grove, MO 65711	TITLE NAME STREET ADDRESS CITY - ST - ZIP	600053933546 05/06/05--01008--007 **150.00
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D Jones, R. William 8455 Hwy JJ Mountain Grove, MO 65711	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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12. 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 10 or on an attachment with an address with all other like empowered.

SIGNATURE: R. William Jones, President 04/20/05 417-668-0328
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

T. Roberts APR 26 2005