

2001 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 19, 2001 8:00 am
Secretary of State

05-19-2001 90278 028 ***150.00

DOCUMENT # P95000077903

1. Entity Name

PERICH STUDIOS, INC

Principal Place of Business

Mailing Address

8102 W KNIGHTS GRIFFIN RD 8102 W KNIGHTS GRIFFIN RD
PLANT CITY FL 33565 PLANT CITY, FL 33565
USA USA

768521

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3339269

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional**
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PERICH, DAVID
8102 W KNIGHTS GRIFFIN RD
PLANT CITY, FL 33565

Name

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

City

FL

Zip Code

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

Signature of person or persons of registered agent and fee if applicable

(Not to be completed by Agent submitting request for new filing)

(Not)

9. This corporation is eligible to satisfy its intangible
tax filing requirement and elects to do so
(See criteria on back) ☐**FEI NUMBER P-95000077903 \$100.00**
REGISTRATION FEE \$200.00
REGISTRATION FEE \$200.00
REGISTRATION FEE \$200.0010. Election Campaigns Financing
(Trust Fund Contribution) ☐**\$5.00 May Be**
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If any)

TITLE **D.P.** ☐ Delete
NAME **PERICH, DAVID**
STREET ADDRESS **8102 W KNIGHTS GRIFFIN RD**
CITY-ST-ZIP **PLANT CITY FL 33565**TITLE ☐ Change ☐ AdditionTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition

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 of this report, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID A. PERICH