

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000033431

1. Entity Name

FAME ENTERTAINMENT, INC.

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90454 002 ***150.00

Principal Place of Business

Mailing Address

401 S.W. 27TH AVENUE
MIAMI FL 33135

401 S.W. 27TH AVENUE
MIAMI FL 33135-2903

2. Principal Place of Business

3. Mailing Address

One Unity Square
Suite, Apt. #, etc.
401 S.W. 27th AVENUE

One Unity Square
Suite, Apt. #, etc.
401 S.W. 27th AVENUE

City & State
Miami, Florida

City & State
Miami, Florida

Zip Country

Zip Country

33135

4. FEI Number 65-0747754

Applied For
Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FMR CORP.
401 S.W. 27TH AVENUE
MIAMI FL 33135

Name FMR CORP.
Street Address (P.O. Box Number is Not Acceptable)
One Unity Square
401 S.W. 27th Avenue
City Miami FL Zip Code 33135

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Hector Formoso-Murias, President 4/26/00

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, 2000 Fee will be \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDS
NAME FORMOSO-MURIAS, HECTOR
STREET ADDRESS 401 S.W. 27TH AVENUE
CITY-ST-ZIP MIAMI FL 33135 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Hector Formoso-Murias, President 4/26/00
(305) 372-0700

CRP 014 (03/98)