FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attaching

SIGNATURE:

Jul 31, 2001 8:00 am P96000050871 DOCUMENT # **Secretary of State** 1. Entity Name SHOWPRO, INC. 07-31-2001 90231 016 ***150.00 Principal Place of Business Mailing Address 1238 POLK STREET 1238 POLK STREET HOLLYWOOD FL 33019-1035 HOLLYWOOD FL 33019-1035 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0676208 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MOYAL, PATRICK Street Address (P.O. Box Number is Not Acceptable) **82 NORTH UNIVERSITY DRIVE** PEMBROKE PINES FL 33024 Zip Code City FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!!-FEE-IS-\$550:00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 12, 2001 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CR2E034 (5/01) ☐ Addition TITLE Delete TITLE KRAMER, GARY NAME NAME 1238 POLK STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33019-1035 CITY-ST-ZIP CITY-ST-ZIP D Change ☐ Addition TITLE ☐ Delete TITLE KRAMER, DEANNA NAME NAME 1238 POLK STREET STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 33019-1035 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. I hereby certify that the information supplied with this filling 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

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P.O.B. 220680 - HOLLYWOOD, FL 33022-0680

VOICE: 954-929-8944 - FACSIMILE: 954-929-8945 - E-MAIL: info@showpros-usa.com

July 24, 2001

To: Divisions of Corporations

From: Showpros, Inc.

Re: 2001 Uniform Business Report Fee

To Whom It May Concern:

On July 23, 2001 I called your 800 number and spoke with a Mr. Copeland. I explained to him that I had received the last notice that you send out along with the filing fee of \$550.00. I explained to him that I did not receive the first notice of payment for \$150.00. I thought it was unfair to make us pay the \$550.00 when we had not been given a proper chance to pay the first filing notice. Upon investigation my accountant's office looked in my files to see that I have always previously paid the first notice amount on time. Mr.-Copeland at your office told-me-tosend the first amount \$150.00 along with a letter stating what happened.

I hope that you will please make note in your files that we are paid in full and this matter will be Thanking you in advance.

Deanna Kramer Vice President Showpros, Inc.

-cc: Moyal & Associates