2001	I UNIFORM BUSI	NESS REPOR	T (ÜBR			ED 01 8:00 am	
DOCUMENT # P96000085444 1. Entity Name					Secretary	y of State	
SPACE PRODUCTIONS, INC.			((UP).	05-14-2001 9020	08 001 ***150.00	
Principal Plac	e of Business	Malling Address					
2292 N.W. 82 AVE MIAMI FL 33122 US		2292 N.W. 82 AVE Miami Fl 33122 US			***************************************	8990	
2. Principal Place of Business 555 N.E. 15Th ST. 555		3. Meiling Address 555 P.F. 15	Meiling Address 55 N-F 19Th 5.				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SI	PACE	
City & State		City & State		4. F	El Number 65-0816347	Applied For	
MIAS	Country	17, 1441H	Country - A			Not Applicable 8.75 Additional	
3313			Sounting A.		entificate of Status Desired.	ee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name			
HART, DAVID J				Street Address (P.O. Box Number is Not Acceptable)			
100 NORTH BISCAYNE BLVD., SUITE 2600 MIANI FL 33132							
			City		FL	Zip Code	
O The best of the property of changing its registered office or regis				nistered age			
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 algorithms required when reinstating) DATE							
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be							
Tax filing requirement and elects to do so. After MAY 1, 2001 For (See criteria on back) Make Check Payable to				1 be \$550.00 Trust Fund Contribution. Added to Fees			
		12.		DITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11		
TITLE	D ASSUNTO, NICOLA	☐ Delete	TITLE NAME	NSSON	MMALLEN COLIN	Change Addition 8	
NAME STREET ADDRESS	4722 NW 97 CT		OTHER PROPERTY.	455 <i>N</i> E	(1957 KTŘŘÍ FL 33 FL	KA Change Addition SO	
CITY-ST-ZIP	MIAMI FL .	☐ Delets	TILE C	ч -		Change 54 Addition C	
NAME	·		NAME CONCERS OF	PISTIZO CON LOSCIAGUARANOS, OFC 204			
STREET ADDRESS CITY-ST-ZIP_			CITY-ST-ZIP	ANAC	AS, VENEZUELA.	<u> </u>	
TITLE		☐ Delete	TITLE NAME			Change Addition	
NAME STREET ADDRESS			- STREET ADDRESS				
CITY-ST-ZIP		Delete	TITLE			☐ Change ☐ Addition	
NAME		,	NAME STREET ADDRESS				
STREET ADDRESS CITY-ST-ZIP		•	CITY-ST-ZIP				
TITLE		☐ Delete	TITLE NAME	_		☐ Change ☐ Addition	
NAME STREET ADDRESS			STREET ADDRESS		•		
CTTY-ST-ZIP			CITY-ST-ZIP			☐ Change ☐ Addition	
TITLE NAME		□ Deleta	TITLE NAME			□ owner	
STREET ADDRESS CITY-ST-ZIP		ļ	STREET ADORESS : CITY-ST-ZIP				
13. I hereby o	on this report or cupolemental report is t	a um tedt ban aterusse ban our	exemption stated	a the came i	19.07(3)(i), Florida Statutes. I further certifugal effect as if made under oath; that I are	n en officer of difector 1	
of the cor	on this report of supplemental report is to poration or the receiver or trustee empoy or on an attachment with an address, with	rered to execute this report as r	equired by Chapte	er 607, Florid	da Statutes; and that my name appears in	Block 11 or Block 12 if	
	1 4 (7)	7/10	MAN .	4	- 1 20/21	1206/0401610	