AMENDED

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 MAY 13 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000088730

1. Entity Name

Pop Starz, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2500 N Military Trail	2500 N Military Trail
Suite, Apt. #, etc.: Suite 225-D	Suite, Apt. #, etc.: Suite 225-D
City & State: Boca Raton, Florida	City & State: Boca Raton, Florida
Zip: 33431 Country: USA	Zip: 33431 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 650712902 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Vanessa H. Lindsey

Street Address (P.O. Box Number is Not Acceptable): 5185 Southeast 20th Street, Suite E

City: Ocala **FL** Zip Code: 34471

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: Vanessa H. Lindsey Vanessa H. Lindsey 5/6/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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

TITLE	P, D, CEO & Sec.
NAME	Tucker, Michelle
STREET ADDRESS	2500 N Military Trail
CITY-ST-ZIP	Suite - D Boca Raton, Florida 33431
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TITLE	400005611114--5
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5/5/02

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Michelle Tucker 5-7-02 561-992-1188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #