

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P916000099534

1. Entity Name

Quantum Cat Entertainment, Inc.

**FILED**  
**Apr 19, 2001 8:00 am**  
**Secretary of State**

04-19-2001 90063 001 \*\*\*150.00

Principal Place of Business

Old Address:  
2648 Robert Trent Jones Dr #217  
Orlando, FL 32835

Mailing Address

16 Quantum Cat Entertainment  
7603 Southern Brook Bend #204  
Tampa, FL 33635

New Address: c/o James Breitbail 7603 Southern Brook Bend Tampa, FL 33635

2. Principal Place of Business

7603 Southern Brook Bend  
Suite, Apt. #, etc.  
#204  
City & State  
Tampa, FL  
Zip  
33635  
Country  
USA

3. Mailing Address

7603 Southern Brook Bend  
Suite, Apt. #, etc.  
#204  
City & State  
Tampa, FL  
Zip  
33635  
Country  
USA

C0049250

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3434243

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

Kingley, Joe  
2648 Robert Trent Jones Dr #17  
Orlando, FL 32835

7. Name and Address of New Registered Agent

Name: James Breitbail  
Street Address (P.O. Box Number is Not Acceptable)  
7603 Southern Brook Bend #204  
City: Tampa FL Zip Code: 33635

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

James Breitbail (James Breitbail) Joseph J. Kingley 4/10/01  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning.) DATE

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, 2001 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-Owner Joseph Kingley 4220 Arbor Gates Dr Atlanta, GA 30324	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Co-Owner James Breitbail 7603 Southern Brook Bend #204 Tampa, FL 33635	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

James Breitbail  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/01  
Date

813-891-1762  
Daytime Phone #

CR2E034 (11/00)