

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000001395

1. Entity Name  
E. KLINE PRODUCTIONS, INC.

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90160 014 \*\*\*150.00

0271148

Principal Place of Business  
~~10081 PINES BLVD~~  
~~#201~~  
~~PEMBROKE PINES FL 33024~~  
~~US~~

Mailing Address  
1307 ST TROPEZ CIRCLE  
1804  
WESTON FL 33326  
US

00051737



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
112 Weston Rd  
Suite, Apt. #, etc.  
# 195  
City & State  
Weston FL  
Zip  
33326  
Country

3. Mailing Address  
SAM5  
Suite, Apt. #, etc.  
City & State  
Zip  
Country

4. FEI Number 65-0716760  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
KLINE, ERIC  
1307 ST TROPEZ CIRCLE #1804  
WESTON FL 33326

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 Eric H. Kline President DATE 4-29-01  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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  
DP KLINE, ERIC 1307 ST TROPEZ CIRCLE #1804 WESTON FL 33326  
Delete  
Delete  
Delete  
Delete  
Delete  
Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
TITLE NAME STREET ADDRESS CITY-ST-ZIP  
Change Addition  
Change Addition  
Change Addition  
Change Addition  
Change Addition  
Change 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: Eric H. Kline DATE 4-29-01 DAYTIME PHONE # 954-430-8045  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)