2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 17, 2000 8:00 am Secretary of State DOCUMENT # **P97000029721** 1. Entity Name PIRATE VIDEO PRODUCTIONS, INC. 04-17-2000 90079 043 ***150.00 Principal Place of Business Mailing Address POST OFFICE BOX 816866 POST OFFICE BOX 816866 HOLLYWOOD FL 33081 HOLLYWOOD FL 33081-0866 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0749060 Not Applicable \$8.75 Additional Fee Required Country Zip Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent JEFFREY -1 Street Address (P.O. Box Number is Not Acceptable) RAUSCHER, JEFFREY L 5926 GRANT STREET #2 HOLLYWOOD FL 33021 #35 City AINAG BEACH 8. The above named entity submite this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees X (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME RAUSCHER, JEFFREY L STREET ADDRESS STREET ADDRESS 5926 GRANT STREET #2 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 □ Change ☐ Addition ☐ Delete TITLE PAUSCHER, JEFFREY L. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP ☐ Change ☐ Addition ☐ Delete TITI E TITLE NAME THE LEADURERS STREET ADDRESS ST: 71P CITY-ST-ZIP

i.i. 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 feceiver or truetee impowered 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 adachment with an address, with all other like empowered.