0117293
Þ

FILED

-2002 UNIFORM BUSINESS REPORT (UBR)

Aug 11, 2002 8:00 am Secretary of State P97000058190 DOCUMENT # 1. Entity Name 08-11-2002 90168 018 ***150.00 CARMAR PRODUCTIONS CORPORATION Principal Place of Business Mailing Address 4615 N.W. 6TH STREET 4615 N.W. 6TH STREET SUITE F SUITE F GAINESVILLE FL 32609 GAINESVILLE FL 32609 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3502677 Not Applicable Zip · Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ASSE, CARLOS F Street Address (P.O. Box Number is Not Acceptable) 4615 N.W. 6TH STREET SUITE F **GAINESVILLE FL 32609** 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE 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 FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Added to Fees Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete TITLE ☐ Change Addition ASSE, CARLOS NAME STREET ADDRESS 4615 N.W. 6TH STREET, SUITE F STREET ADDRESS CITY-ST-ZIP **GAINESVILLE FL 32609** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

13. I hereby certify that the information supplied with this filing does not qualify indicated on this report or supplemental report is true and accurate and the of the corporation or the receiver or vistee empowered to every the processing the changed, or on an attachment with an address, with all other like empowered. Alify or the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of that my signature shall have the same legal effect as if made under oath; that I am an officer or director port as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TIT: F

SIGNATURE:

CITY-ST-ZIP

TITLE

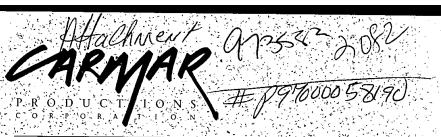
NAME STREET ADDRESS

☐ Delete

Daytime Phone #

☐ Change

☐ Addition



ARCHITECTURAL DECORATIVE PAINTING
SCENIC DESIGN & FABRICATION

July 11, 2002

Florida Department of State
Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir

I just spoke on the telephone with your representative Ms. Trisha I explained to her that I had received a notice 2002 Uniform Business Report where it said that our 2002 UBR was not filed and you were giving us 60-day notice to file. I told her that we had sent our 2002 UBR in the middle of this past April along with a check which has yet to be cashed by our bank.

Her response was that I should sent you a copy of the 2002 UBR we sent you along with the new copy you sent us and reissue the \$150.00 check. I am following her instructions and doing so:

Enclosed are copy of our copy on file of 2002 UBR, new 2002 UBR you sent us and the new reissued check.

Calor

Carlos F. Asse Director

	4615 NW. 6TH STREET • SUITE F. A. A.
	Post Office Box 1106
:7	Gainesville, FL 32602
	TELEPHONE/FAX: (352) 375-4239

DOC 1. Entity	UMENT #	P970	00058190	1		AHa.Chv	rear /	
CARM	AR PRODUCTION	S CORPOR	ATION	•				
	Place of Business		Mailing Address					
SUITE F	l 8th Street LLE FL 32809		4815 N.W. 6TH STREE SUITE F GAINESVILLE FL 3260			<i>C.</i>	1120	587
. Princip	of Place of Business		3. Mailing Address					
Suite, A	pt. #, etc.		Suite, Apt. #, etc.			DO NOT WR	ITE IN THIS SPACE	
City & S	itate		City & State		4.	FEI Number 59-350267		Applied For
Zip	Countr		Zip	Country	5.	Certificate of Status Desired		Not Applicate 5 Additional
	6. Name and Addr	ess of Current I	Registered Agent			Name and Address of New F	Fee R	equired
	CAPLOS F W. 6TH STREET			Name		Box Number is Not Acceptable		
UITE	•			-		DOA INUMBER IS NOT Acceptable	e)	
+-nî3E9	TILLE FL 32009		GAINESVILLE FL 32609					
	:					ent, or both, in the State of Flo	FL Zip) Code
NATURE 'bis corr ax blor	Salustine typed a painted turn poration is eligible to salis requirement and efects is pria on back)	of indistrined agent and by its Intangible and so	d title if app cable (NOT	S registered office	atura required when n		inda. DAH	55.00 May Be
NATURE 'bis corr ax blor	Salicano typed a pained may condition is eligible to saliss requirement and elects to sea on back)	of inflictation agent and y its Intangible ando so	d title if app crabe (NOT	S registered office	ature required when in	10. Election Campaign Fini Trust Fund Contribution	DATI	55.00 May Be odded to Fees
NATURE This con I'ax bling See criti	Salustine typed a painted turn poration is eligible to salis requirement and efects is pria on back)	of michied agent and visits Intangible 1 do so	d title if app cable (NOT	s registered office	ature required when in	instating) 10. Election Campaign Find	DATI	55.00 May Be ddded to Fees
NATURE This corp Tax then (See critical Tabbress Tabbress	Signature typed a primer man poration is eligible to sails (requirement and elects in the oral on back) O ASSE, CAPLOS 4615 N.W. 6TH STR	of michied agent and visits Intangible 1 do so	d title if app crabe (NOT	TE Registered office TE Registered Agent sup. T12. TITLE NAME STREET ADDRESS	ature required when in	10. Election Campaign Fini Trust Fund Contribution	DATI DATI DERS AND DIRECT	65.00 May Be dded to Fees FORS IN 11 nge Addition
SNATURE This corp Tax filing	Signature typed a primer man poration is eligible to sails (requirement and elects in the oral on back) O ASSE, CAPLOS 4615 N.W. 6TH STR	of michied agent and visits Intangible 1 do so	d title if app cable (NOT	TE Registered office TE Registered Agent sign. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ature required when in	10. Election Campaign Fini Trust Fund Contribution	DAN ANDREQ CERS AND DIREC Cha	55.00 May Be dded to Fees IORS IN 11 Inge Addition
NATURE This corp Tax then (See ante T ADDRESS ST-ZIP ADDRESS ADDRESS	Signature typed a primer man poration is eligible to sails (requirement and elects in the oral on back) O ASSE, CAPLOS 4615 N.W. 6TH STR	of michied agent and visits Intangible 1 do so	RECTORS Delete	TILE NAME STREET ADDRESS CITY - ST - ZIP TILE NAME STREET ADDRESS CITY - ST - ZIP TILE NAME STREET ADDRESS	ature required when in	10. Election Campaign Fini Trust Fund Contribution	DATI DATI DATI CERS AND DIRECT Chai	S5.00 May Be odded to Fees ICHS IN 11 Inge Addition Inge Addition Inge Addition
NATURE This cont Lax blim (See critical Control Taddress ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	Signature typed a primer man poration is eligible to sails (requirement and elects in the oral on back) O ASSE, CAPLOS 4615 N.W. 6TH STR	of michied agent and visits Intangible 1 do so	RECTORS Delete Delete	TE Registered office TE Registered office TE Registered Agent sign. TE Registered Agent sign. TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ature required when in	10. Election Campaign Fini Trust Fund Contribution	DATI DATI DOCUMENT DERS AND DIRECT Char Char	S5.00 May Be deded to Fees FORS IN 11 Inge Addition Inge Addition Ge Addition

SIGNATURE:

CARLOS F. ASSE 19 APR 2002 (352) 375-4239



ARCHITECTURAL DECORATIVE PAINTING
SCENIC DESIGN & FABRICATION ,

August 5, 2002

Barbara Mitchell
Document Specialist
Florida Department of State
Division of Corporations
Uniform Business Report Filings
P. O. Box 1500
Tallahassee, FL 32302-1500.

Dear Barbara:

Sorry so much for making such obvious mistake. I guarantee you that it will never happen again.

Post, Office Box 1106
Gainesville, FL 32602
Telephone/Fax: (352) 375-4239

Sincerely,

Carlos F. Asse

Director