

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000062699 (8)

1. Corporation Name

UNITED CREW FILMS, INC.

Principal Place of Business

37 SKYLINE DR., #4301
LAKE MARY FL 32746

Mailing Address

37 SKYLINE DR., #4301
LAKE MARY FL 32746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/18/1997

4. FEI Number

59-3457081

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

LOE, BRIAN R
3074 W. LAKE MARY BLVD., #136
LAKE MARY FL 32746

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of person named as registered agent and the applicable

(BRIAN R. LOE, ATTORNEY AT LAW) 4/20/98

(NOTE - Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME NORMAN, DAVID
STREET ADDRESS 1742 FIFESHIRE CT.
CITY-ST-ZIP LONGWOOD FL 32779

☐ DELETE

TITLE D
NAME GOLD, JENNIFER
STREET ADDRESS 1136 SORIA AVE.
CITY-ST-ZIP ORLANDO FL 32807

☐ DELETE

TITLE D
NAME NORMAN, VICTOR
STREET ADDRESS 472 SUN LAKE CIRCLE, #310
CITY-ST-ZIP LAKE MARY FL 32746

☐ DELETE

TITLE D
NAME MAYNARD, JEFF
STREET ADDRESS 1136 SORIA AVE.
CITY-ST-ZIP ORLANDO FL 32807

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Julia SZAKACS
1.3 STREET ADDRESS 20 Turtle Creek Drive
1.4 CITY-ST-ZIP Tequesta, FL 33469

☐ Change ☒ Addition

2.1 TITLE D
2.2 NAME Sandra P. Vest
2.3 STREET ADDRESS 212 Pennington Point
2.4 CITY-ST-ZIP Blountland, GA 30731

☐ Change ☒ Addition

3.1 TITLE D
3.2 NAME Ralph W. and Linda Braun
3.3 STREET ADDRESS 1014 S. Monticello
3.4 CITY-ST-ZIP Winamac, IN 46796

☐ Change ☒ Addition

4.1 TITLE D
4.2 NAME James Garner, and Kathleen Ann Gehn
4.3 STREET ADDRESS 193 E Grandband Ave
4.4 CITY-ST-ZIP Lake Mary, FL 32746

☐ Change ☒ Addition

5.1 TITLE D
5.2 NAME John Millonig
5.3 STREET ADDRESS 393 Lakewood Ave
5.4 CITY-ST-ZIP Lk. Mary, FL 32746

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97)