

2001/2002

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9700008X563

1. Entity Name

P R PRODUCTIONS INTERNATIONAL, INC

FILED

02 MAY 28 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2608-1 N OCEAN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

POMPAÑO BEACH FL

4. FPI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee RequiredDO NOT WRITE
IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

PAMELA HEYDET

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

2608-1 N OCEAN BLVD

#131

City

POMPAÑO BEACH FL

Zip

33064

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

Signature, Name and Printed Name of registered agent and date of registration

(NOTE: Registered Agent Signature Required when submitting)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)☐

January 1 - May 1 Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

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	P.D.
NAME	PAMELA HEYDET
STREET ADDRESS	2608-1 N OCEAN BLVD
CITY-ST-ZIP	POMPAÑO BEACH, FL 33064

NAME	9000005763779--6
STREET ADDRESS	-06/12/02--01055--018
CITY-ST-ZIP	****300.00 ****300.00

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Pamela Heydet - Pres. 4/15/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR25034E (12/01)