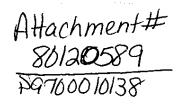
FILED May 21, 2003 8:00 am Secretary of State 05-21-2003 90193 012 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)						80120589				
DOCUMENT # P97000101038							נטמ	, au	,00	
1. Entity Name MAMA CLOWN SILLY FARM PRODUCTS, INC.										
Principal Place 2412 TYLER HOLLYWOOD,	STREET	Mailing Address 2412 TYLER STREET HOLLYWOOD, FL 33020		INCORI	REG	T ADDRESS				
2. Principal Place of Business 3. Mailing Address 5.4 M & Suite, Apt 1, etc. Suite, Apt 1, etc.										
					CHECK HERE IF MAKING CHANGES					٦
I City & State	1W000, FL		City & State			4. FEI Number 65-0815674 Applied For Not Applicable				
Z1336	20 Country SA	Zip	5. Certificate of Status Desired			S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name & A A O C C A A A A A A A A A A A A A A A										}
MURAD, MARCELA 230 14TH AVENUE Street Address [P.O. Box Argmber is Not Acceptable]										-
HOLLYWO	OD, FL 33020			2,3	0	B. 1474/4	vens	u		1
				City (-17)	LL	1W000.	FL	Zip Coge	n20	1
8. The above	named entity submits this statement for tions of registered agent.	the purpose of changing its	registere				a lam/am	llar with,	<u> </u>	1
SIGNATURE	Wane -					5//	7/0	3		
TO THE PERSON NAMED IN COLUMN TWO	Signature, typed or primed name of registered agent a	od tite i applicable. (NOTE	: Rogin Inte	d Agentaignalum migrimu	i when re	instating)	OÁTE.			-
After Make Check	FILE NOWILL FEE IS \$160.00 F r May 1, 2003 Fee will be \$550.00 (Payable to Florida Department o	f State				Election Campaign Finan- Trust Fund Contribution.	cing) May Be to Fees	
10.	OFFICERS AND (11.	, ,	AD	DITIONS/CHANGES TO OFFICE		RECTORS Change	IN 11] a
NAME STREET ADDRESS CITY-ST-2P	DPS MURAD, MARCELA 2142 TYLER ST HOLLYWOOD, FL 33020	☐ Delete					L	i cligitye	Addison	CR2E034 (10/02)
TITLE NAME STREET ADDRESS	M MERINO, PATRICIA 2142 TYLER ST	☐ Delate	•	E E1 Address	•) Change	Addition	CRZ
TITLE RAME STREET ADDRESS	HOLLYWOOD, FL 33020	☐ Delirite	TITLE				[] Change	Addition	
CHY-S1-2P			CITY	- ST - 21P				1 =:		
NAMESTHEET ADDRESS. CITY-ST-ZP		□ Delote					L,) Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZP		□ Delete						Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZP		□ Delete	A					Change	Addition	
12. 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 suppliermental 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 postiverior trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attractiment with an address, with all other way impowered. SIGNATURE: **Comparison of the postive of the post										



SILLY FARM PRODUCTS FACE PAINTING INTERNATIONAL MAGAZINE

2142 TYLER STREET - Hollywood, FL 33020

May 19 2003

Florida Dept of State Division of corporations P. O Box 6327 Tallahassee, Fl 32314

Dear Sir or Madam,

Enclosed our Uniform Business Report and our check for \$150.00.

Please note that the address on the top is incorrect, therefore we never received our filing documentation. The only reason I came across the information is because I happened to come across a form that was filed last June.

Please correct the information so in the future we may get our forms in a timely manner. We are a very small business and can not afford to pay late fees.

Thank you for your attention,

Office Administrator