

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90087 032 ***150.00

0407865 AV

DOCUMENT # P98000029153

1. Entity Name

STAGEWRITE ENTERTAINMENT INC.

Principal Place of Business

**6851 MAXWELL DRIVE
BOCA RATON FL 33496**

Mailing Address

**6851 MAXWELL DRIVE
BOCA RATON FL 33496**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0826026

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PRICE, TODD A
6851 MAXWELL DRIVE
BOCA RATON FL 33496**

Name

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

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **PRICE, TODD A**
STREET ADDRESS **6851 MAXWELL DRIVE**
CITY-ST-ZIP **BOCA RATON FL 33496**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/10/02 561-997-9258

CR2E034 (9/01)

Attachment
EDWARDS & ANGELL, LLP

COUNSELLORS AT LAW

since 1894

Rebecca Fortuna Black
Direct Dial: (561) 820-0260
Direct Fax: (888) 325-9197
E-Mail: rblack@ealaw.com

ONE NORTH CLEMATIS STREET, SUITE 400
WEST PALM BEACH, FL 33401-5523
(561) 833-7700
FAX (561) 655-8719

816418

January 18, 2002

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee FL 32302-1500

Re: **Stagewrite Entertainment Inc.**
Document #P98000029153

Dear Sir or Madam:

Enclosed for filing on behalf of our client, **Stagewrite Entertainment Inc.**, is its 2002 Uniform Business Report, together with a check in the amount of \$150.00 in payment of the filing fee.

Sincerely,



Rebecca Fortuna Black, CLAS
Corporate Paralegal

Enclosures