

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000052484

1. Entity Name Kings of Kings Entertainment INC.

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90765 049 ***150.00

DO NOT WRITE IN THIS SPACE

90117752

2. Principal Place of Business
P.O. Box 180841
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 180841
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Tallahassee, FL
Zip
32318
Country
Leon

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4. FEI Number
65-0843565
Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Jerry Pierrelus
Street Address (P.O. Box Number is Not Acceptable)
642 N.E. 139 St.
City
Tallahassee **FL** Zip Code
32361

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 Jerry Pierrelus

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

(NOTE: Registered Agent signature required when resigning)

4/30/03
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 NAME STREET ADDRESS CITY-ST-ZIP	<u>CEO</u> <u>Jerry Pierrelus</u> <u>P.O. Box 180841</u> <u>Tallahassee, FL 32318</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Junior Biggs</u> <u>P.O. Box 180841</u> <u>Tallahassee, FL 32318</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President of Musical Operations</u> <u>Martin Montesinos</u> <u>8516 N.W. 201 St.</u> <u>Miami Lakes, FL 33015</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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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)(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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jerry Pierrelus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/03
Date

(305) 360-2416
Daytime Phone #

CR2E034B (12/01)