## **2002 UNIFORM BUSINESS REPORT (UBR)**

## **DOCUMENT#** P98000053842

1. Entity Name

ALL ACCESS ENTERTAINMENT GROUP INC.

Principal Place of Business Mailing Address				_			
P.O. BOX 23022 ST. PETERSBURG FL 33742		P.O. BOX 23022 ST. PETERSBURG FL 33742					
2. Principal	Place of Business	3. Mailing Address		$\dashv$			
Suite Ant	# atc	Suite, Apt. #, etc.			CO NOT HOUTE IN THE	10.004.05	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THI	S SPACE	
City & State		City & State		4.	FEI Number NOT APPLICABLE		Applied For
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 A	
	6. Name and Address of Current	Registered Agent		7. [	Name and Address of New Registere		
000000	44444004 44		Name				
	, AMANDA M J WAY N		Street Address (		Box Number is Not Acceptable)		
837717TH WAY N SAINT PETERSBURG FL 33702							<del></del>
			City			Zip Co	de
8. The above	e named entity submits this statement for	the nurnose of changing its	registered office or regi	eterod ac	For path in the State of Florida Lo	<b>L</b>	
the obliga	tions of registered agent.	the purpose of chariging its	registered office of regi	stered ag	gent, or both, in the state of Florida. Tal	iii tariiilai wili	і, апо ассері
SIGNATURE							
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	: Registered Agent signature req	uired when re	einstating) 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 \$550.00 After September 13, 2002 Fee will be \$ Make Check Payable to Department of			10. Election Campaign Financing Trust Fund Contribution.	□ \$5.0 □ Adde	<b>00</b> May Be ed to Fees
11.	OFFICERS AND I	DIRECTORS	12.	AC	DDITIONS/CHANGES TO OFFICERS AT	ND DIRECTOR	RS IN 11
TITLE , NAME STREET ADDRESS CITY-ST-ZIP	PCEO COOPER, AMANDA 8377 17TH WAY N SAINT PETERSBURG FL 33702	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addition
TITLE	VP	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	COOPER, JOSEPH		NAME			_ ,	J
STREET ADDRESS CITY-ST-ZIP	8377 17TH WAY N SAINT PETERSBURG FL 33702		STREET ADDRESS CITY-ST-ZIP				1
ITLE IAME STREET ADDRESS CITY-ST-ZIP	T BEHRENS, CHARLIE 3703 NORTHGREEN AVE #2102 TAMPA FL	^ □ Dēletē - `	TITLE NAME STREET ADDRESS CITY-ST-ZIP		and the afficiency of a	— [] Change	Addition
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IAME			NAME				
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CITY-ST-ZIP

**FILED** Jul 22, 2002 8:00 am Secretary of State 07-22-2002 90161 038 \*\*\*150.00

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:** 

CITY-ST-ZIP

Daytime Phone #

Attachment P98000053842

July 17, 2002

To Whom it may concern,

I just received my first copy of the UBR to file. I never received a UBR in December like I usually do. When I called your phone number, a gentleman on the phone stated I should write a letter stating such and enclose my check for \$150.00.

Thank you for your understanding,

All Access Entertainment, Inc