Amended

08-26-2002 90054 039 ****61.25

FILED
P98000064111
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 AUG 29 PM 4:01

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000064111

1. Entity Name: DAVE DOG PRODUCTIONS, INC.

DO NOT WRITE IN THIS SPACE

976462

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address	4. FEI Number / Applied For / Not Applicable
5970 SW 18TH ST Suite, Apt. #, etc.	5970 SW 18TH ST Suite, Apt. #, etc.	65-0855263
City & State: BOCA RATON, FL Zip: 33433 Country:	City & State: BOCA RATON FL Zip: 33433 Country:	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: HELENE FLASTER

Street Address (P.O. Box Number is Not Acceptable): 5970 SW 18TH ST.

City: BOCA RATON FL Zip Code: 33433

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: Helene Flaster HELENE FLASTER, PRESIDENT 8/27/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when changing) DATE

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

January 1st - 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 NAME: HELENE FLASTER STREET ADDRESS: 5970 SW 18TH ST CITY-ST-ZIP: BOCA RATON, FL 33433	
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CR2E034B (12/01)

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: Helene Flaster HELENE FLASTER 8/27/02 (561) 995-7634
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #

8/29/02