2000 UNIFORM BUSINESS REPORT (UBR)

6/

FILED
Jul 21, 2000 8:00 am
Secretary of State
07-21-2000 90149 044 ***408.75
06-23-2000 90102 030 ***150.00

DOCUMENT # 98-0000078969

1. Entity Name

Flowing Images, Inc. R

Principal Place of Business	Mailing Address
1999 NE. 150th Street No. Miami, FL 33181	1999 NE. 150th St. No. Miami, FL 33181

2. Principal Place of Business	3. Mailing Address
1999 NE. 150th Street Suite, Apt. #, etc.	1999 N.E. 150th Street Suite, Apt. #, etc.
City & State: No. Miami, FL Zip: 33181 Country: USA	City & State: No. Miami FL Zip: 33181 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0863331 ☐ 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
William A. Malnick, Esq. 100 S.E. 2nd Street - Ste 2700 Nationsbank Tower Miami, FL 33131-2146	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, 2000 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President/Director Sargente, Joseph B. 889 NE 73rd Street Miami, FL 33178 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President/Secy/Dir. Cohen, Darren S. 19380 Collins Avenue #427 B Miami Beach, FL 33160 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 5911 S.W. 41st St. #A8 Davie, FL 33314
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Cohen, David 19380 Collins Ave. #427B Miami Beach, FL 33160 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

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: _____ Pres 6-16-00 (305) 949-5800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Flowing Images

Attachment
98 000078969
A00L28701

7/14/00

Please include a certificate of status.

If any further information is needed, please contact

Darren Cohen
(305) 949-3800

Thank you

main office 305-949-3800
ad dept. 305-899-5617
fax 305-945-7132
flowingimages@email.com