

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

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90073 009 ***150.00

DOCUMENT # P990000013989

1. Entity Name

Cricket Productions, Inc. ✓



DO NOT WRITE IN THIS SPACE

10091543

2. Principal Place of Business

19320 N.W. 47th Ave.

Suite, Apt. #, etc.

3. Mailing Address

19320 N.W. 47th Ave.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, Florida

City & State

Miami, Florida

4. FEI Number

650895401

Applied For

Not Applicable

Zip

33055

Country

U.S.A.

Zip

33055

Country

U.S.A.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Christine Johnson

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

15710 N.W. 44th Court

City

Opa locka

FL

Zip Code

33054

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	<u>President</u>
NAME	<u>Terri Fletcher</u>
STREET ADDRESS	<u>19320 NW 47 Ave.</u>
CITY-ST-ZIP	<u>Miami, FL. 33055</u>
TITLE	<u>Vice President</u>
NAME	<u>Christine Johnson</u>
STREET ADDRESS	<u>15710 NW 44 Court</u>
CITY-ST-ZIP	<u>Opa locka, FL. 33054</u>
TITLE	<u>Vice President</u>
NAME	<u>John Fletcher</u>
STREET ADDRESS	<u>19320 N.W. 47 Ave.</u>
CITY-ST-ZIP	<u>Miami, FL. 33055</u>
TITLE	
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CITY-ST-ZIP	

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Terri Fletcher

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Terri Fletcher

4/27/03

Date

305-624723

Daytime Phone #

CR2E034B (12/02)