2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## P99000017167 **DOCUMENT#**

1. Entity Name PTS-ÓRLANDO MANAGEMENT CORP.

Principal Place of Business 17200 VENTURA BLVD STE 125 ENCINO CA 91316

Mailing Address 17200 VENTURA BLVD STE 125 **STE 125** 

ENCINO CA 91316

**FILED** Mar 31, 2003 8:00 am Secretary of State

03-31-2003 90292 023 \*\*\*150.00



2. Principal F	Place of Busine	NTURA BU		ing Address V <i>GNTU</i> L	A.	BLU	D	-				
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State				<b>4.</b> F	4. FEI Number 95-4724869			plied For t Applicable	
Zip	Country				Country	Country		Certificate of Status Desired		8.75 Add ee Require		
6. Name and Address of Current Registered Agent							7. N	Name and Address of New	v Registered A	gent		
CORPORATION SERVICE COMPANY						Name						
1201 HAYS STREET					S	Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE FL 32301-2525												
•					c	ity			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. 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												
After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State					<del></del>			9:Election Campaign Trust Fund Contribu	·		<b>0</b> -May Be to Fees	
10.		OFFICERS AND DI	RECTO	RS	11.		AD	DITIONS/CHANGES TO O	FFICERS AND	DIRECTORS	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOLOMON, <del>17000 VEN</del> ENCINO CA	TURA BLVD STE 302		☐ Delete	TITLE NAME STREET AD	DORESS /	7200	O VENTURA )	BLVD#	Change / 25	☐ Addition \	
TITLE	S			Delete	TITLE			$\sim c/N_0$	<u>: H 7 /</u>	S Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	SOLOMON,	TURA BLVD STE 302		L.J Delete	NAME STREET AD	DRESS /	720	NENTURA NEINO, C NEINO, C	1 BLVE A 913	1. # 12	Addition	
TITLE				☐ Delete	TITLE					☐ Change	☐ Addition	
NAME					NAME							
STREET ADDRESS	1				STREET AD							
CITY-ST-ZIP	<del> </del>	<del></del>			CITY-ST-Z							
TITLE NAME				☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS		and the second s	• -	The second second second	STREET AD	DRESS	a with	No. 1	ي- چي	೯೩ ∼∹ು	-	
CITY-ST-ZIP					CiTY-ST-Z	IP .						
TITLE	<u> </u>		·	☐ Delete	TITLE		<del>``</del> `	<del></del>	*-	Change	Addition	
NAME					NAME	1						
STREET ADDRESS					STREET AD	ľ						
CITY-ST-ZIP	2				CITY-ST-Z	IIF		<del></del>				
TITLE NAME				☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS					STREET AD	DRESS						
CITY-ST-ZIP					CITY-ST-Z							
	<u> </u>					1						

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 Block 11 if changed, or on an attachment with an address, with all other like empowered