

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2002 8:00 am
Secretary of State

05-23-2002 90144 041 ***158.75

DOCUMENT # P99000020579

1. Entity Name

LONGEV ENTERTAINMENT, INC.

Principal Place of Business

**5077 PARK CENTRAL DR
 #1525
 ORLANDO FL 32839**

Mailing Address

**5077 PARK CENTRAL DR
 #1525
 ORLANDO FL 32839**

80113160



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5077 PARK CENTRAL DR.

3. Mailing Address

Suite, Apt. #, etc.

APT# 1525

City & State

ORLANDO, FLORIDA

4. FEI Number

59-3561935

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**PARHAM, ERIC
 5077 PARK CENTRAL DR
 #1525
 ORLANDO FL 32839**

7. Name and Address of New Registered Agent

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

Eric Parham **ERIC PARHAM**

04/30/02

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, 2002 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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CP
 PARHAM, ERIC
 5077 PARK CENTRAL DR #1525
 ORLANDO FL 32839**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DV
 HIGH, ANGELA
 5077 PARK CENTRAL DR #1525
 ORLANDO FL 32839**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
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 CITY-ST-ZIP

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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 *Eric Parham* **ERIC PARHAM**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/02 (407) 856-0914

Date

Daytime Phone #

CR2E034 (9/01)