

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000023140

1. Entity Name

OSIRIS PRODUCTIONS, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90096 032 ***150.00

Principal Place of Business

Mailing Address

10123 NW 48TH DR.
CORAL SPRINGS FL 33076

10123 NW 48TH DR.
CORAL SPRINGS FL 33076-1707

2. Principal Place of Business

3. Mailing Address

7365 SMITH BROOK DR
Suite, Apt. #, etc.

7365 SMITH BROOK DR
Suite, Apt. #, etc.

City & State

City & State

LAKE WORTH, FL

LAKE WORTH, FL

Zip

Country

Zip

Country

33467

33467

4. FEI Number

Applied For

65-0903182

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

SARIDIS, GUS

10123 NW 48TH DR.
CORAL SPRINGS FL 33076

Name

GUS SARIDIS

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

7365 SMITH BROOK DR

City

LAKE WORTH

FL

Zip Code

33467

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

4/24/00

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 ☒ Delete
NAME HOUSTON, TIMOTHY
STREET ADDRESS 1306 PROSPECT ST.
CITY-ST-ZIP DELRAY BEACH FL 33444

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME SARIDIS, GUS
STREET ADDRESS 10123 NW 48TH DR.
CITY-ST-ZIP CORAL SPRINGS FL 33076

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 7365 SMITH BROOK DR
CITY-ST-ZIP LAKE WORTH, FL 33467

TITLE ☒ Delete
NAME GIBSON, STEPHEN D
STREET ADDRESS 6131 NW 31ST WAY
CITY-ST-ZIP FT. LAUDERDALE FL 33309

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME MCCLYMONT, CLINTON W
STREET ADDRESS 10287 RAMBLEWOOD DR.
CITY-ST-ZIP CORAL SPRINGS FL 33071

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GUS SARIDIS

Date

4/24/00

Daytime Phone #

954-425-7257

CR2E034 (9/99)