## 2001 UNIFORM BUSINESS REPORT (UBR) **FILED** May 01, 2001 08:00 AM DOCUMENT # P9900023140 Entity Name **Secretary of State** OSIRIS PRODUCTIONS, INC. Principal Place of Business Mailing Address 7365 SMITHBROOKE DR. 7365 SMITHBROOKE DR LAKE WORTH FL LAKE WORTH FL 33467 33467 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0903182 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SARIDIS GUS SARIDIS 10123 NW 48TH DR. Street Address (P.O. Box Number is Not Acceptable) 10123 NW 48TH DR. CORAL SPRINGS FL33076 City Zip Code CORAL SPRINGS 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. BEAU SARIDIS 05/01/2001 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE X Delete CR2E034 (11/00) TITLE ☐ Addition MAME MCLYMONT CLINTON NAME 10287 RAMBLEWOOD DR. STREET ADDRESS STREET ADDRESS FL 33071 CITY-ST-ZIP CORAL SPRINGS CITY-ST-ZIP D X Delete TITLE ☐ Change NAME **GIBSON** STEPHEN NAME STREET ADDRESS 6131 NW 31ST WAY STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE $\mathbf{FL}$ 33309 CITY-ST-ZIP Delete TITLE X Change ☐ Addition SARIDIS GUS NAME SARIDIS GUS STREET ADDRESS 10123 NW 48TH DR. STREET ADDRESS 7365 SMITHBROOKE DR. CITY-ST-ZIP CORAL SPRINGS $\mathbf{FL}$ 33076 CITY-ST-ZIP LAKE WORTH FL. 33467 X Delete TITLE Change ☐ Addition HOUSTON TIMOTHY NAME STREET ADDRESS 1306 PROSPECT ST. STREET ADDRESS CITY-ST-ZIP DELRAY BEACH 33444 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

05/01/2001

Daytime Phone #

Date

SIGNATURE: \_Gus Saridis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR