

FILED
May 22, 2001 8:00 am.
Secretary of State

05-22-2001 90018 026 ***158.75

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P-99000035054**

1. Entity Name

PEOPLE PRODUCTION, INC

Principal Place of Business

Mailing Address

20441 N.E. 10 PLACE
 MIAMI, FL 33179

768723

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0912433

Applied For

Not Applicable

Zip

Country

Zip

Country

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

FRANCIA H. RODRIGUEZ
 20441 N.E. 10 PLACE
 MIAMI, FL 33179

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

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

REG. AGENT

04/27/2001

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, 2001 Fee will be \$350.00
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
 P/S/D. RODRIGUEZ, FRANCIA. 20441 N.E. 10 PLACE MIAMI, FL 33179

☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
☐ Change ☐ Addition
 TITLE NAME STREET ADDRESS CITY-ST-ZIP
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 TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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 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

Director

04/27/2001 (305)

Date/Time Printed

P/S/D (Formerly # 8 Y 01-13)

CR20034 (10/00)