

**2002 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P99000052260

1. Entity Name

RENAISSANCE - EVOLUTION FILM PRODUCTION, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5 NW 39th St

3. Mailing Address

WESERBACH STR. 28

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Attn: E. Abon

City & State

City & State

Miami, FL

FRANKFURT

Zip

Zip

Country

Country

33127-2944

60489

GE

4. FEI Number

65-0979146

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name **Florida Incorporators, Inc.**

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

8875 Hidden River Parkway, Ste. 300

City

Tampa

FL

Zip Code
33637

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

Mark Hankins, President

4/15/02

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)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

**D
Stephenson, Peter
WESERBACH STR. 28
FRANKFURT 60489 GE**

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*****150.00 ***150.00**

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter Stephenson, Director

4/15/02

Date

+49-69-78860425

Daytime Phone #

FILED

02 MAY -3 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UBR2E034B (12/01)