

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

FILED
May 21, 2002 8:00 am
Secretary of State

05-21-2002 91141 023 ***158.75

DOCUMENT # **P99000054462**

1. Entity Name

I AM PRODUCTIONS, INC.

DO NOT WRITE IN THIS SPACE

666177

2. Principal Place of Business

4555 LENOX BOULEVARD P.O. BOX 616495

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

ORLANDO, FLORIDA

City & State

ORLANDO, FLORIDA

4. FEL Number

59-3585577

Applied For

Not Applicable

Zip

32811

Country

USA

Zip

32861-6495

Country

USA

5. Certificate of Status Desired

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\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

S. HARRIS PIERRE

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

4555 LENOX BOULEVARD

City

ORLANDO

FL

Zip Code

32811

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 date if applicable.

(NOTE: Registered Agent Signature required when reinstating)

4/30/02

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.

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\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	CHIEF EXECUTIVE OFFICER
NAME	S. HARRIS PIERRE
STREET ADDRESS	4555 LENOX BOULEVARD
CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	PRESIDENT
NAME	S. HARRIS PIERRE
STREET ADDRESS	4555 LENOX BOULEVARD
CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	CHAIRMAN OF THE BOARD
NAME	S. HARRIS PIERRE
STREET ADDRESS	4555 LENOX BOULEVARD
CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	CHIEF FINANCIAL OFFICER
NAME	S. HARRIS PIERRE
STREET ADDRESS	4555 LENOX BOULEVARD
CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	EXECUTIVE VICE PRESIDENT
NAME	KATIE I. PIERRE
STREET ADDRESS	4555 LENOX BOULEVARD
CITY-ST-ZIP	ORLANDO, FLORIDA 32811
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

**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:

S. HARRIS PIERRE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02 (407)299-7881

Date

Daytime Phone #

CR2E034B (12/01)