

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000064482

1. Entity Name
THE RIGGING ROOM, INC.

Principal Place of Business

4439 SKYDIVE LANE
ZEPHYRHILLS FL 33540

Mailing Address

4439 SKYDIVE LANE
ZEPHYRHILLS FL 33540

2. Principal Place of Business

4439 Skydive Lane

Suite, Apt. #, etc.

3. Mailing Address

4439 Skydive Lane

Suite, Apt. #, etc.

City & State

Zephyrhills FL

City & State

Zephyrhills FL

Zip

33540

Country

Zip

33540

Country

4. FEI Number

65-0941310

Applied For

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

PARKER, THOMAS
4439 SKYDIVE LANE
ZEPHYRHILLS FL 33540

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

May 9 01

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 \$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
NAME
DVP
PARKER, THOMAS J
STREET ADDRESS
400 WEST AIRPORT DRIVE
CITY-ST-ZIP
SEBASTIAN FL 32958 ☐ Delete

TITLE
NAME
Thomas Parker
4439 Skydive Lane
STREET ADDRESS
Z hills FL
CITY-ST-ZIP
33540 ☒ Change ☒ Addition

TITLE
NAME
PD
PRICE, MARCUS
STREET ADDRESS
5121 8TH ST.
CITY-ST-ZIP
ZEPHYRHILLS FL 33540 ☐ Delete

TITLE
NAME
PD
MARCUS PRICE
STREET ADDRESS
5121 8th St
CITY-ST-ZIP
Zephyrhills FL 33540 ☐ Change ☐ Addition

TITLE
NAME
SD
SCHMIDTMANN, EMILY
STREET ADDRESS
12 ANN ST.
CITY-ST-ZIP
SELDEN NY 11784 ☐ Delete

TITLE
NAME
DVP
Emily Schmittman
STREET ADDRESS
12 Ann St
CITY-ST-ZIP
Selden NY 11784 ☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

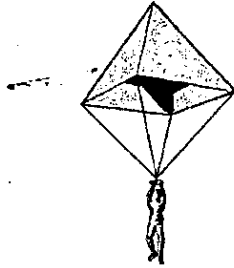
May 9 01 81379126

Date Daytime Phone #

CR2E034 (10/00)

The Rigging Room Inc

Attachment
P#p990006112
A0070158



Dear sir

I'm sorry that my uniform report has been filed late. I had totaly forgot about it until I saw it on my desk today,

Sincerely,

A handwritten signature in black ink, appearing to be 'T. Parker', with a long horizontal line extending to the right.

Thomas Parker