

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000067420

1. Entity Name  
**YNOT PRODUCTIONS, INC.**

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

03-12-2001 90499 028 \*\*\*150.00

Principal Place of Business Mailing Address  
~~770 CLAUGHTON ISLAND DR., STE. 1816~~ ~~770 CLAUGHTON ISLAND DR., STE. 1816~~  
~~MIAMI FL 33131~~ ~~MIAMI FL 33131~~

2. Principal Place of Business 3. Mailing Address  
**2165 NW 62ND DRIVE** **2165 NW 62ND DRIVE**  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
**BOCA RATON, FL** **BOCA RATON, FL**  
Zip Country Zip Country  
**33496** **USA** **33496** **USA**

4. FEI Number **65-0938731** 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  
**BERGER, H. TONY** Name **H. TONY BERGER**  
**770 CLAUGHTON ISLAND DR., STE. 1816** Street Address (P.O. Box Number is Not Acceptable)  
**MIAMI FL 33131** **2165 NW 62ND DRIVE**  
City **BOCA RATON** FL Zip Code **33496**

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 **H. TONY BERGER, PRESIDENT** DATE **3/6/01**  
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 Tax filing requirement and elects to do so. ☐ **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	<b>D</b>	<input checked="" type="checkbox"/> Delete	TITLE	<b>PRESIDENT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BERGER, H. TONY</b>		NAME	<b>H. TONY BERGER</b>	
STREET ADDRESS	<b>770 CLAUGHTON ISLAND DR., STE. 1816</b>		STREET ADDRESS	<b>2165 NW 62ND DRIVE</b>	
CITY-ST-ZIP	<b>MIAMI FL 33131</b>		CITY-ST-ZIP	<b>BOCA RATON, FL 33496</b>	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			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.

SIGNATURE: **H. TONY BERGER, PRESIDENT** DATE **3/6/01** DAYTIME PHONE # **917-449-9066**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0151766

CR2E034 (10/00)