

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000074250

1. Entity Name

COALITION ENTERTAINMENT GROUP, INC.

**FILED**  
**Apr 30, 2001 8:00 am**  
**Secretary of State**

04-30-2001 90036 040 \*\*\*150.00

Principal Place of Business

200 LESLIE DRIVE  
#504  
HALLANDALE FL 33009

Mailing Address

200 LESLIE DRIVE  
#504  
HALLANDALE FL 33009

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0943889

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

BIONDO, ADRIANE  
200 LESLIE DRIVE  
#504  
HALLANDALE FL 33009

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's 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) ☐

**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 P ☐ Delete  
NAME BIONDO, ADRIANE  
STREET ADDRESS 200 LESLIE DR #504  
CITY-ST-ZIP HALLANDALE FL 33009

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

*Attachment*  
THE LAW OFFICES OF  
**JOHN BRADLEY AND ASSOCIATES, P.A.** # P99000074250 751510  
1215 EAST BROWARD BOULEVARD, SUITE 200  
FORT LAUDERDALE, FLORIDA 33301

JOHN F. BRADLEY

(954) 523-6160

April 19, 2001

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**Re: Coalition Entertainment Group, Inc.**  
**Document # P99000074250**

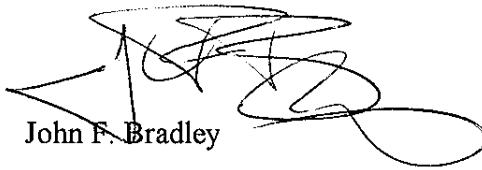
Dear Sirs:

Please find enclosed the original executed 2001 Uniform Business Report for the above-referenced corporation together with check in the amount of \$150.00. Please file the report at your earliest opportunity.

Thanking you for your attention to this matter, I am,

Very truly yours,

JOHN BRADLEY AND ASSOCIATES

  
John F. Bradley

JFB/br

Encls.

cc: Coalition Entertainment Group, Inc.