FILED
May 18, 2001 8:00 am
Secretary of State

05-18-2001 91264 001 ***450.00

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000078157

1. Entity Name

DIAMONDBACK ENTERTAINMENT, INC.

Principal Place of Business / Mailing Address

2255 Glades Road, Suite 411-E
Boca Raton, Florida 33431

72559

2. Principal Place of Business		3. Mailing Address	
2255 Glades Road		2255 Glades Road	
Suite, Apt. #, etc. Suite 411-E		Suite, Apt. #, etc. Suite 411-E	
City & State Boca Raton, FL		City & State Boca Raton, FL	
Zip 33431	Country Palm Beach	Zip 33431	Country Palm Beach

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1018930 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Steve Polisar
420 Lincoln Road, #240
Miami, FL 33139

7. Name and Address of New Registered Agent

Name William S. Kramer, Esquire
Street Address (P.O. Box Number is Not Acceptable) Abrams Anton P.A.
2255 Glades Road, #411-E
City Boca Raton FL Zip Code 33431

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] (Signature, typed or printed name of registered agent and title if applicable.) STEVE POLISAR (NOTE: Registered Agent signature required when reinstating) 5/24/01 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

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 / STREET ADDRESS / CITY-ST-ZIP	PSD Panton, Dean A. 2255 Glades Road, Suite 411-E Boca Raton, Florida 33431 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Evgueni Saligiane 3460 NE 16 St North Miami Beach, FL 33160 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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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]