2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an advess, with all other like empowered.

DOCUMENT # **P99000108775** May 07, 2000 8:00 am Secretary of State ROBERT FREE PRODUCTIONS, INC. 05-07-2000 90021 023 ***150.00 Mailing Address Principal Place of Business 2007 N 25TH AVENUE 2007 N 25TH AVENUE HOLLYWOOD FL 33020-2328 HOLLYWOOD FL 33020-2328 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number 65-0970510 Applied For City & State City & State Not Applicable \$8.75 Additional Country Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FREE, ROBERT E Street Address (P.O. Box Number is Not Acceptable) 2007 N 25TH AVENUE HOLLYWOOD FL 33020-2328 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Change PTD TITLE ☐ Delete TITLE FREE, ROBERT E NAME NAME STREET ADDRESS 2007 N 25TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020-2328 ☐ Change ☐ Addition TITLE ☐ Delete TITLE BRANHAM, STEPHEN W NAME NAME STREET ADDRESS 2007 N 25TH AVENUE STREET ADDRESS CITY ST-7IP CITY-ST-ZIE HOLLYWOOD FL 33020-2328 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ Delete TITI E TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. Thereby 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

Daytime Phone #