FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 25, 2003 8:00 am Secretary of State

04-25-2003 90255 030 ***150.00

1. Entity Ivan	E STUDIOS AND FILM	I CO., INC.				
2. Principal Place of Business		IN THIS SPACE 3. Mailing Address		11017720		
2001 West Sample Road Suite, Apt. #, etc. Suite #111		2001 West Sample Road Suite, Apt. #, etc. Suite # 111		DO NOT WRITE IN THIS SPACE		
City & State Pompano Beach, FL		City & State Pompano Beach, FL		4. FEI Number 65-0966898	65-0966898 Not Applicable	
Zip 33064	Country USA	Zip 33064	Country USA	5. Certificate of Status Desired	□ \$8.75 / Fee Requ	
		Militar Managar and Lander		7. Name and Address of Current	Registered Agent	
	MATION COL	शितिह्य	raulci	a Klein, Esq.		
e verd			Street Address (P.O. Box Number is Not Acceptable	e) 	
		AUG	2001	West Sample Road		
		. Prádě 18	City Pomp	ano Beach	FL 3306	ode 64
8. The above	named entity submits this statement for tions of registered agent.	r the tourpose of changing its	registered office or register	red agent, or both, in the State of Flo		
SIGNATURE .	Signatine, spiral or printed name of registered agent	and the rapplicable. (NOT	E: Registered Agent signature required	I when reinstating)	8-0-7	
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10.	OFFICERS AND				· PUII in its and	The distriction of the districti
NAME	President Steve Berlowski 2001 West Sample Road		DAME			
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NAME Street address			DATE STREET ADDRESS			
CITY-ST-ZIP			GLA-GA-SID			etalor en
12. I hereby c	certify that the information supplied with	this filing does not qualify for	r the exemption stated in Se	ction 119.07(3)(i), Florida Statutes.	I further certify that the	information

12. I nereby 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-03 954-935-3160

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