

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90182 038 ***150.00

DOCUMENT # S51243

1. Entity Name
AVENUE PRODUCTIONS INC.



Principal Place of Business
**2810 E. OAKLAND PARK BLVD.
STE. 308
FT LAUDERDALE FL 33306
US**

Mailing Address
**2810 E. OAKLAND PARK BLVD.
STE. 308
FT LAUDERDALE FL 33306
US**

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 **65-0261011**

Applied For

Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEIN, ROBERT

~~2452 NW 26TH CIR.~~

~~BOCA RATON FL 33431~~

Name **Stein, Robert**

Street Address (P.O. Box Number is Not Acceptable)

2920 NW 29th Avenue

City **BOCA RATON**

FL

Zip Code **33434**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Robert Stein President - change of address 3/25/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **STEIN, ROBERT**
STREET ADDRESS **2452 NW 26TH CIR.**
CITY-ST-ZIP **BOCA RATON FL 33431**

☒ Change ☐ Addition
TITLE **D** ☐ Delete
NAME **STEIN, ROBERT**
STREET ADDRESS **2452 NW 26TH CIR.**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☐ Delete
NAME **STEIN, KAREN**
STREET ADDRESS **2452 NW 26TH CIR.**
CITY-ST-ZIP **BOCA RATON FL 33431**

☒ Change ☐ Addition
TITLE **D** ☐ Delete
NAME **STEIN, KAREN**
STREET ADDRESS **2452 NW 26TH CIR.**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Robert Stein* **ROBERT STEIN** President

3/25/03

954 561 1226

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)