## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 19, 2001 8:00 am Secretary of State DOCUMENT # V15453 \*\*\* 1. Entity Name WARRIOR ENTERTAINMENT GROUP, INC. 04-19-2001 90020 022 \*\*\*150.00 Principal Place of Business Mailing Address 2001 NE 38 ST. 2001 NE 38 ST. LIGHTHOUSE POINT FL 33064 LIGHTHOUSE POINT FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3171376 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HENRY, JEFFREY R. Street Address (P.O. Box Number is Not Acceptable) 2001 NE 38 ST. LIGHTHOUSE POINT FL 33064 Zip Code City 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** (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 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, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition TITLE ☐ Change ☐ Delete TITLE NAME HENRY, JEFFREY R NAME STREET ADDRESS STREET ADDRESS 2001 NE 38 ST. #2 CITY-ST-ZIP CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

NIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

JEFFREY R. HENRY 4-12-01 (954) 7

CR2E034 (10/00