## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

V66938

**DOCUMENT #** 1. Entity Name

UNIGLOBE MAIN EVENTS INC.



**FILED** May 02, 2003 8:00 am Secretary of State
05-02-2003 90382 017 \*\*\*150.00

						GOO WE	15/				
Principal Place of Business 5280 CARROLL CANYON RD STE - 210 SAN DIEGO CA 92121 US 2. Principal Place of Business		Mailing Address 1199 WEST PENDER ST STE - 900 VANCOUVER 8C V6E2R CA 3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.						014405		
						CHECK HERE IF MAKING CHANGES					
City & State		City & State		4.	FEI Number <b>59-3145309</b>			Applied For Not Applicable			
Zip Country		Zip	Zip Cou		try	5.			<b>\$8.75</b> A Fee Requi		
	6. Name	and Address of Current	Registere	ed Agent			7.	Name and Address of New Re			
		region was remarked to the control of the control o				Name			-		
BEYER, DAVID A % RUDNICK & WOLFE					Street Address (P.O. Box Number is Not Acceptable)						
101 E KE	NNEDY BL	/D SUITE 2000									
TAMPA FL 33602-5133						City			FL	Zip Co	ode
	e named entit tions of regist		r the purp	pose of changing its i	registere	ed office or r	egistered a	gent, or both, in the State of Flori	da. I am f	I. amiliar with	n, and accept
SIGNATURĖ.		···				· <u>-</u>					
<u> </u>	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE:	: Registere	d 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						Election Campaign Final     Trust Fund Contribution.		<b>\$5.</b> ] Add	<b>00</b> May Be ed to Fees		
10.		OFFICERS AND	DIRECTO	PRS	11.		A	DDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 11
TITLE NAME STREET AODRESS CITY-ST-ZIP	COBD CHARLWO 900-1199 VANCOUV	W. Pender St.		☐ Delete					J	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	5280 CAR	IN, THOMAS ROLL CANYON RD., # IO CA 92121	210	☐ Delete						☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST. BARTRAM 5280 CAR		210	☐ Delete		j				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	•					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY+ST-ZIP				☐ Delete	1					Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete	1	- 1			·,-	Change	Addition

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.

2003