## 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment

## Apr 05, 2004 8:00 am Secretary of State **DOCUMENT # 510050** 1. Entity Name 04-05-2004 90080 033 \*\*\*150.00 HARRICK MUSIC, INC. Principal Place of Business Mailing Address 7751 NW 146 STREET MIAMI LAKES FL 33016 7751 NW 146 STREET 94044518 MIAMI LAKES FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (11/03) 4. FEI Number City & State City & State Applied For 59-1688310 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\square$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ADLER, MARTHA Street Address (P.O. Box Number is Not Acceptable) 7751 NW 146 ST MIAMI LAKES FL 33016 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE ☐ Change Addition NAME CASEY, HARRY W NAME STREET ADDRESS 7751 NW 146 ST STREET ADDRESS MIAMI LAKES FL 33016 CITY-ST-ZIP CITY-ST-ZIP 3me ☐ Delete ☐ Change Addition ADLER, MARTHA MAME 7751 NW 146 ST STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33016 CITY-ST-ZIP CITY-ST-ZIP Delete Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition MAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

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