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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

(3)

DOCUMENT # 1. Corporation Name	H11498	(3)
AFTERHOURS MUS	SIC, INC.	
Principal Place of Business	Mailing	Address
1959 NE 149 STREET NORTH MIAM! FL 33181) ne 149 street PTH MIAMI FL 33181

							3. Date Incorpora 07/09/19			e of Last R)4/25/19	95
2. Principal Plac	e of Business	2a. N	Mailing Address				4. FEI Number			h	Applied For
		26					59-242	1957			Not Applicable
Suite, Apt. #,	etc.	27	Suite, Apt. #, etc.		•		5. Certificate of S	tatus Desired			Additional Required
City & State			City & State				6. Election Camp Trust Fund Co	-			May Be
Zip	Country	F-1	Žip	Cour	ntry		This corporation Florida Statute	n has liability for	intangible t	ax under s	199.032,
<u> </u>	25	29		30			10. Name and Ac			Apent	
	g. Name and Address	of Current Registe	red Agent		81	Name	10. 144110 4110 74	10.003 0. 110			
				İ	ا''						
BATT, HAL					82	Street Add	dress (P.O. Box Numbe	r is Not Acceptab	ole)		
1432 NW 129TH TERR SUNRISE FL 33323				İ	83						
SUNNISE	- FL 33323				84	City			Fl	85 Z	ip Code
SIGNATUREs	Signature, typed or printed name of OF	registered agent and title if as FICERS AND DIRECT	IORS	NOTE Registered	1 Ag⊷n	t signature requi	red when reinstating" ADDITIONS/C	HANGES TO OF	DATE FICERS AN		
ITLE	PST		DELETE							☐ Change	Addition
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				1. 1 II 1.2 N/							
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 truster empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or an attachment with an address.

HAL S. BATT

HAL S. BATT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-96 (305)947-6841

Date Clayture Proce #