FILE NOW: FILING FEE IS \$61.25

Mailing Address

3521 N.W. 8TH AVENUE

POMPANO BEACH FL 33064

NONPROFIT CORPORATION ANNUAL REPORT 1999

THE SINGING CLUB, INC.

1. Corporation Name

Principal Place of Business

3521 N.W. 8TH AVENUE POMPANO BEACH FL 33064

DOCUMENT # N39644



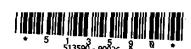
FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED May 07, 1999 8:00 am Secretary of State

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								ē	
2. Principal P	lace of Business	\vdash	2a. Mailing Address 26				3. Date Incorporated or Qualifed 08/10/1990	· <u>···</u>	
Suite, Apt.	#, etc.	1	Suite, Apt. #, etc.				4. FEI Number	Ap	plied For
22		27					65-0209077	No	t Applicable
City & State			City & State				5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
Zip	Country	Zip	Country			6. Election Campaign Financing	\$5.00	May Be	
25 29			30	30			Trust Fund Contribution	Added t	o Fees
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
				8	1	Name			
HURST, CARL					82 Street Address (P.O. Box Number is Not Acceptable)				
5244 NW 54 ST						Ottobe Madio.			
COCONUT CREEK FL 33073				8	3				
COCONDI CILLINI E SSOI O								£ 7in (Code
				Į e	14	City	FL i°	5 Zip (J000
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Lhereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503. Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agent a	nd title	if applicable. (NOTE: Re	gistered A	gent	signature required v	when reinstating) DATE		·
12.	OFFICERS AND	-		13.		<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTO	RS IN 12
TITLE	D		☐ DELETE	1.1 TITLE	_			Change	☐ Addition
NAME	HURST, CARL			1 2 NAM	E				}
STREET ADDRESS	3521 N.W. 8TH AVE.			1.3 STREET ADDRESS		ADDRESS			
	POMPANO BEACH FL			1.4 CITY-ST-ZIP		Ì			-
C/TY-ST-ZIP TITLE	D		☐ DELETE	2.1 TITLE	_	-		Change	☐ Addition
NAME	HURST, BILLIE JO			2.2 NAM					j
	3521 N.W. 8TH AVE.					ADDRESS			.]
STREET ADDRESS	POMPANO BEACH FL			2.4 CITY					
CITY-ST-ZIP			☐ DELETE	3.1 TITL	_	· <u>ZP</u>		Change	☐ Addition
TITLE	D KUDTVKA TADA		_ 5555,6	3.2 NAM			_		
NAME	KURTYKA, TARA				_	ADDRESS			j
STREET ADDRESS	3521 NW 8TH AVE								-
CITY-ST-ZIP	POMPANO BEACH FL		☐ DELETE	3.4. CITY 4.1 TITLE	_	-412		Change	Addition
TITLE			LJ DELL'IL						—
NAME			1	4. 2 NAN		ADDDECC			
STREET ADDRESS						ADDRESS			1
CITY-ST-ZIP			☐ DELETE	4.4 CITY	_	-417	,	Change	Addition
TITLE			□ OELETE	5.1 TITLE 5.2 NAM		· -		, minda	
NAME	·		ı			ADDRESS !			i
STREET ADDRESS						1			1
CITY-ST-ZIP			[] DELETE	5.4 CITY 6.1 TITLE		-41		Change	☐ Addition
TITLE			["] nereig	6.2 NAM			_	, vilariyo	
NAME			!	•		ADDDESS			
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP				6.4 CiTY	-ST-	ZIP			

14. 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 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: BILLES CAST TO SIGNING OFFICER OFFICER OF PRINTED NAME OF SIGNING OFFICER O