

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

FILED
Oct 07, 2002 8:00 A.M.
Secretary of State

DOCUMENT # P01000029494
1. Entity Name
 MUSIC TIMES RECORDS, INC.

Principal Place of Business
 6306 PEMBROKE ROAD
 MIRAMAR FL 33023

Mailing Address
 6306 PEMBROKE ROAD
 MIRAMAR FL 33023



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 Broward County

3. Mailing Address
 6306 Pembroke Rd.

City & State
 Miramar FL

City & State

Zip 33023 **Country** USA

Zip **Country**

4. FEI Number 65-1088724 **Applied For**
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
 CHASE, BARRY O ESQ.
 % LAW OFFICE OF BARRY OLIVER CHASE, P.A.
 ONE S.E. 3RD AVE., SUITE 1880
 MIAMI FL 33131

7. Name and Address of New Registered Agent
 Name: George + Sonda Simpson
 Street Address (P.O. Box Number is Not Acceptable): 6306 Pembroke Rd
 City: Miramar **FL** Zip Code: 33023

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 *George Simpson*
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SIMPSON, GEORGE 285 N.E. 185TH STREET SUITE 6 MIAMI FL 33179 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD SIMPSON, SONDA 285 N.E. 185TH STREET SUITE 6 MIAMI FL 33179 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Simpson, George 6306 Pembroke Rd. Miramar, FL 33023 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD Simpson, Sonda 6306 Pembroke Rd Miramar, FL 33023 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE: *SIGNATURE REQUIRED*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **Daytime Phone #**

CR2E034 (4/02)