FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P96000054960 (5) **DOCUMENT** #

1 DUR RECORDS CORPORATION

Principal Place of Business

Mailing Address

FILED Apr 27 1998 8:00am Secretary of State



2200 N FLORIDA MANGO 2ND FLOOR 2200 N FLORIDA MANGO 2ND FLOOR WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/26/1996 FEI Number 2a. Mailing Address Applied For 2. Principal Place of Business 65-0724095 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Country 8. This corporation owes or has paid the current year Intangible Ζıρ Zip Country ☐ Yes □ No Personal Property Tax due June 30. 30 29 24 25 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 SLAVIN. MICHAEL A 4440 PGA BLVD SUITE 402 82 Street Address (P.O. Box Number is Not Acceptable) PALM BEACH GARDENS FL 33410 83 84 City 85 Zio Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE Change TITLE 1.1 TITLE PST DURR. NICOLE 1.2 NAME NAME DURR, NICOLE 2200 N FLORIDA MANGO 2ND FLOOR 1.3 STREET ADDRESS STREET ADDRESS 1016 No. Dixie Hwy, Ste 1 WEST PALM BEACH FL 33409 1.4 CITY-ST-ZIP West Palm Beach, FL 3340 Lhange CITY-ST-ZIP Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - 2IP Change Addition DELETE 3.1 TITLE THILE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAM 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE THILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CiTY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 61 TITLE TITLE 6.2 NAME NAME **63 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP 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 suppliemental 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 received to trustee amount seed to recute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an address.

SIGNATURE:

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