COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

FILED
Jul 09, 1999 8:00 am
Secretary of State
07-09-1999 90012 003 ***550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M20341
Corporation Name
TARGET MUSIC DISTRIBUTORS, INC.

Principal Place of Business	Mailing Address
5 NW 66 ST MI FL 33166	7925 NW 66 ST MIAMI FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/09/1985

4. FEI Number: 59-2580844 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No

Principal Place of Business	2a. Mailing Address
	26
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27
City & State	City & State 28
Zip / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

KULLA, GARY
7925 NW 66 ST.
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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.

GNATURE _____ 2/5/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
E	DP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
ME	KULLA, GARY	1.2 NAME	
EET ADDRESS	7925 NW 66 ST	1.3 STREET ADDRESS	
Y-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
E	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
ME		2.2 NAME	
EET ADDRESS		2.3 STREET ADDRESS	
Y-ST-ZIP		2.4 CITY-ST-ZIP	
E	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
ME		3.2 NAME	
EET ADDRESS		3.3 STREET ADDRESS	
Y-ST-ZIP		3.4 CITY-ST-ZIP	
E	☐ DELETE	4.1 TITLE	☐ Change ☒ Addition
ME		4.2 NAME	
EET ADDRESS		4.3 STREET ADDRESS	
Y-ST-ZIP		4.4 CITY-ST-ZIP	
E	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
ME		5.2 NAME	
EET ADDRESS		5.3 STREET ADDRESS	
Y-ST-ZIP		5.4 CITY-ST-ZIP	
E	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
ME		6.2 NAME	
EET ADDRESS		6.3 STREET ADDRESS	
Y-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (5/99)

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

IGNATURE: Jay Kulla SIGNATURE REQUIRED 2/5/99 305 591-2188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #