PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 330421

1. Corporation Name

Principal Place of Business	Mailin
1000 N DIXIE HWY	1000 P
W PALM BCH FL 33401	W PAL

FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90051 044 ***150.00

	ny music & sound sys	TEMO, INC.			ļ				
Principal Place	e of Business	Mailing Address				i iskina (list litti odi)		VIEN BIB AF BIB	el denit minit innt
1000 N DIXIE #	MY ·	1000 N DIXIE HWY			[•		
W PALM BCH F									
					-	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
	•					· ,	uaired		
L	19	A Mailing Address	·		~}-	05/22/1968 4. FEI Number		- - 	Applied For
<u> </u>	lace of Business	2a. Mailing Address			-	59-1216767) -	Not Applicable
Suite, Apt.	# atc	Suite, Apt. #, etc.				33 12 10 10 1			Additional
22	#, 6tc.	27				Certificate of Status Des	sired 🗌		Required
City & State	е	City & State				6. Election Campaign Fina	ancina —	\$5.0	0 May Be
23		28		•		Trust Fund Contribution	- 11		d to Fees
Zip	Country	Zip	Coun	try		8. This corporation owes t	he current year li	ntangible	
24	25	29	30		Ì	Personal Property Tax.		Yes	□No
	9. Name and Address of Curr	rent Registered Agent				0. Name and Address o	New Registere	d Agent	
85.4	DI IDIANIO	· — ·—		Name					}
l	RL,IRVING		}	32 Street	Address	(P.O. Box Number is Not.	Acceptable)		
l	MONTEREY ROAD								
PALI	N BEACH FL 33480			83					ì
			-	34 City				. 85 Zi	p Code
)				1			FI	┗╵	·
11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607.1508, Florida Statut	es, the ab	ove-named	corporat	tion submits this statement	for the purpose of	of changing	its registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	ite of Florida. Such change was a ligations of, Section 607.0505, Flo	numonzeo rida Statu	es.	oration s	board or directors. Theret	y accept the app	Oumneur as	registered
SIGNATURE									
SIGNATORE	Signature, typed or printed name of registered a		: Registered /	gent signature r	required who	en reinstating)	DATE		
12.		AND DIRECTORS	40						
Tπre)			13.		T 1 1	ADDITIONS/CHANGES	TO OFFICERS A		
	PD	☐ DELETE	1.1 TM			AIRMAN & C	60	Chang	
NAME	PEARL, IRVING		1.1 TM	KE	PE	AIRMAN & C	60		
NAME STREET ADDRESS	PEARL,IRVING 281 MONTEREY RD		1.1 TM 1.2 NAM 1.3 STF	KE EET ADDRESS	PE/ 28	AIRMAN & C ARL, IRVING I MONTER	eo ev rd.		
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PEARL, IRVING 281 MONTEREY RD PALM BEACH FL STD PEARL, WILLIAM 5683 HIGH FLYER RD SOUT	☐ DELETE	1.1 TITI 1.2 NAM 1.3 STF 1.4 CIT 2.1 TITI 2.2 NAM 2.3 STF	EET ADDRESS '-ST-ZIP E BE EET ADDRESS	PE/ 28	AIRMAN & C ARL, IRVING I MONTER	eo ev rd.	SChang 460	e
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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 receive of restee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with all other like empowered.

SIGNATURE: