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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 623537

(8)

EDUCATIONAL MUSIC SYSTEM, INC.

FILED
May 01 1997 8:00am
Secretary of State

Ш	WH	Ш	ЯH		KAM	filli	Ш

Principal Place of Business 1316 N.E. 4TH AVE FT.LAUDERDALE FL 33304-1064		Mailing Addres 1318 N.E. 4TH FT.LAUDERDAL	AVE	I-1032		. 14871) # #118 (1800 146) #446 #44(1 105) #444 #181) #191 #194 #184 #181) 4001				
	•					3. Date incorporated or Qualified 05/31/1979	3a. Date 0		Report	
	Pace of Business	2a. Mailing Ad	dress			4. FEI Number			oplied For	
21		26	<del></del>			59-1935122			ot Applicable	
Surfe, Apt.	#, etc	Suite, Apt.	#, eic.			5. Certificate of Status Desired			Additional equired	
City & Stat	€	City & State	e		·····	6. Election Campaign Financing			May Be	
23		28				Trust Fund Contribution			to Fees	
<b>Z</b> ip	Country	Zıp		Country	r	8. This corporation has liability for i			199.032,	
24	25	29		30			Yes N		· · · · · · · · · · · · · · · · · · ·	
	9. Name and Address of Curre	ent Registered Agent	!	81	Nome	10. Name and Address of New Re	gistered Age	nt		
	HARSON, IDA MAE			Pi	Name					
	2 R N.E. 4TH AVENUE			B2	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
FI.	LAUDERDALE FL 33304			83						
								.,		
				84	City		FL	5 Zip	Code	
SIGNATURE	am familiar with, and accept the obli Signature, typicd or printed name of registered a					 Jired when reinstating)	DATE			
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC				
TITLE	PD		DELETE	1.1 TITLE				Change	Addition	
NAME	RICHARDSON, IDA MAE			1.2 NAME		•				
STREET ADDRESS	1322 R N.E. 4TH AVE.			1.3 STREET	1					
C+TY - ST - ZIP	FT. LAUDERDALE FL		DELETE	1.4 DITY - 5	T-ZIP		רו	Change	Addition	
TITLE	SD RICHARDSON, BRUCE D.	U	DECEIC	2.1 TITLE 2.2 NAME			اسا	Change	L.J Addition	
NAME STREET ADDRESS	1322 R N.E. 4TH AVE.			2.3 STREET	ADDRESS					
CHY-ST-ZIF	FT. LADUERDALE FL			2.4 CITY-						
THLE			DELETE	3.1 TITLE	41 All			Change	Addition	
NAME				3.2 NAME						
STREET ADDRESS				3 3 STREET	ADDRESS					
CHY-ST-7:P			·····	3.4. CITY -	ST-ZIP		······································			
TiTLE			DELETE	4.1 TITLE				Change	Addition	
NAME				4. 2 NAME	-					
STREET ADDRESS					ADDRESS					
CITY ST-2IF			DELETE	4.4 CITY - S	ST-ZIP			Change	Addition	
TITLE		U	PELETE	5.1 TITLE			لبا	o range	L.J. Addition	
NAME CIGGGY ADOUGGG				5.2 NAME	Annesce					
STREET ADDRESS				5.3 STREET 5.4 CITY-5						
CITY-ST-ZIP TITLE		<u> </u>	DELETE	6.1 TITLE	11 - LIF			Change	Addition	
NAME:				6.2 NAME			No.			
STREET ADDRESS				1	ADDRESS					
CITY - ST - ZIP				6.4 CITY - 5						
						THE RESERVE AND ADDRESS.				

4. I do 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.

SIGNATURE:

SCA PRINCE | LUNE PRINCE OF BIGNING OFFICER OR DIRECTOR

7/22/97

954-5P5-3747 Daysina Phone #