

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 637714

1. Entity Name

ANTARES MUSIC CORP.

FILED
May 24, 2000 8:00 am
Secretary of State

05-24-2000 90060 032 ***158.75

Principal Place of Business

Mailing Address

3851-62ND AVE STE I
PINELLAS PARK FL 33781
US

3851-62ND AVE STE I
PINELLAS PARK FL 33781-6007
US

2. Principal Place of Business

P. O. Box 11321

3. Mailing Address

P. O. Box 11321

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

4. FEI Number

59-1945133

Applied For

Not Applicable

Zip

33733

Country

USA

Zip

33733

Country

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KLIMP, CHARLES R
3851-62ND AVE STE I
PINELLAS PARK FL 33781

Name

Susan J. Klump

Street Address (P.O. Box Number is Not Acceptable)

6750-31st Way South

City

St. Petersburg

FL

Zip Code

33712

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.

SIGNATURE

Susan J. Klump

4/28/00

DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete
NAME KLIMP, CHARLES R
STREET ADDRESS 6750-31ST WAY S
CITY-ST-ZIP ST PETERSBURG FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME KLIMP, SUSAN
STREET ADDRESS 6750-31ST WAY S
CITY-ST-ZIP ST PETERSBURG FL

TITLE President/Director ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary/Director ☐ Change ☒ Addition
NAME Mary-Jane Smith
STREET ADDRESS 4533 Third Street North
CITY-ST-ZIP St. Petersburg, FL 33703

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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:

Susan J. Klump
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00

Date

(727) 864-2653

Daytime Phone #

CR2E034 (9/99)