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 # F53250

(9)

CRUISING TUNES, INC.

FILED
May 01 1997 8:00am
Secretary of State

	 	

Principal Place of Business Mailing Address			ress			T 1801/97 1101 91/89 11110 11961 Stiff dass bildit Brott plats pint asatt arbit son			
70 BLANDING BLVD. ORANGE PARK FL 32073 US		SUITE A	2001 WELLS ROAD SUITE A ORANGE PARK FL 32073-2200 US						
						3. Date Incorporated or Qualified 3a, Date of Last Report 05/01/1981			
2. Principal F	Tace of Business	2a, Mailing A	Address			4, FEI Number		Applied For	
21		26			·····	59-2135821		Not Applicable	
Suite, Apt	#, €to	Suite, Ap	ot. #, etc.			5. Certificate of Status Desired		75 Additional se Regulred	
City & Stat	to	27 City & St	ate			6. Election Campaign Financing		.00 May Be	
		28	a.c			Trust Fund Contribution		lded to Fees	
[23] Zip	Country	Zip		Country		8. This corporation has liability for it			
24	25	29		30			Yes No		
<u> </u>	9. Name and Address of Cur		ent			10. Name and Address of New Reg	istered Agent		
BEF	RNSTEIN, CLARK			81	Name	-			
	BLANDING BLVD			82	Street Add	dress (P.O. Box Number is Not Acceptab	e)		
	ANGE PARK 32073								
				83					
į				84	City		85	Zip Code	
					'	rporation submits this statement for the p	FL.	·	
SIGNATURE	Signating typed or puriod name of registered		(NOT	E: Registered Ag	eni signature requ	ulred when reinstating)	DATE		
12.	· p - · · · · · · · · · · · · · · · · ·	AND DIRECTORS	7	13.		ADDITIONS/CHANGES TO OFFIC			
1016	PD	L	DELETE	11 TITLE			Cha	ange L. Addition	
NAME	BERNSTEIN, CLARK			1 2 NAME					
STREET ADDRESS	10000		1	1.3 STREET	1				
CITY - ST - ZIP	ORANGE PARK FL		T DELETE	1.4 CITY-5	ST - ZIP	-	Chi	ange Addition	
100	S CONSTENT OF ADM	L	DELETE	2.1 TITLE			LJ OIK	inge 🗀 Abdillon	
NAME	BERNSTEIN, CLARK	•		2.2 NAME	4000000				
STREET ADDRESS	70 BLANDING BOULEVARD	,		2.3 \$TREE					
CHY-SI-ZIP	ORANGE PARK FL		DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP		- Ch	ange Addition	
NAME		_		3.2 NAME					
STREET ADDRESS				3.3 STREE	ADORESS				
COY-SI-ZIP				3.4. CITY-					
THIE			DELETE	4.1 TITLE			Cha	ange Addition	
NAM!				4. 2 NAME		·			
STREET ADDRESS				4.3 STREET	ADDRESS				
C-FY-ST-7-P				4.4 CITY-	ST - ZIP				
TIPLE			DELETE	5.1 TITLE			☐ Chi	ange 🔲 Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	T ADDRESS				
City-St 7th				5.4 CITY -:	ST-ZIP				
TITLE			DELETE	6.1 TITLE			☐ Ch	ange 🔲 Addition	
NAME				6.2 NAME					
STREET ALDRESS				6.3 STREE	ADDRESS				
CITY-ST-20F				6.4 CITY -					
14 Ldo ber	eby certify that the information sun	policed with this filing d	loes not quali	fy for the ex-	emption state	ed in Section 119.07(3)(i), Florida Statute	 I further certify 	/ that the	

rate increasy certify that the information supplied with this filing does not qualify for fire exemption stated in Section 1.19.0/(3)(i), Florida Statutes. Further certify that 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.