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 # F91867

(4)

Mailing Address

BIG FAT MUSIC, INC.

Principal Place of Business

FILED	
Apr 30 1997 8:00ai	n
Secretary of State	į

W HOWARD ALBERT 13365 W. DIXIE HWY. NORTH MIAMI FL 83161		% HOWARD ALBERT 13385 W. DIXIE HWY. NORTH MIAM! FL 33161~			Date Incorporated or Qualified	3a. Date of Last	Report	
					07/23/1982	04/04/1996	•	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			59-2120733		Vot Applicable	
Sulte, Apt. #, etc.		27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24	25 29 30				8. This corporation has liability for inlangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Curr	ent Registered Agent	81	1	10. Name and Address of New Reg	Istered Agent		
	ERT, HOWARD		81	Name				
	85 W. DIXIE HWY. RTH MIAMI FL 33161		82	Street Add	lress (P.O. Box Number is Not Acceptabl	e)		
			83					
			84	City	Propagation in the second seco	FL 85 70	Code	
i Office or r	registered agent, or both, in the Sta	te of Florida. Such change was:	authorized b	∠the cornora	poration submits this statement for the pullion's board of directors. I hereby accept	roose of epopeine	its registered	
agent. I a	im familiar with, and accept the obli	gations of Section 607.0505, F	lorida Statute	3.	accept	тые арропциент г	is registered	
SIGNATURE	Signature, typed or printed name of impistered a	conductification distribution 1865	II. Ornstrund An		lired when reinstating)			
12.		ND DIRECTORS	13.	wit signations regar	ADDITIONS/CHANGES TO OFFICE	BS AND DIRECTO)RS IN 12	
TITLE	PTD	☐ DELETE	1.1 1ITE			☐ Change		
NAME	ALBERT, HOWARD		1.2 NAME					
STREET ADORESS	10626 NE 11TH AVE		1.3 STREE	ADDRESS				
CITY-ST-ZIP	MIAMI SHORES FL	·····	14 CHY-5	11-712				
TITLE	VSD	☐ DELETE	2111111			☐ Change	Addition	
NAME	ALBERT, RON		2.2 NAME					
STREET ADDRESS	10626 NE 11TH AVE		2 3 STHEFT	ADDRESS				
CITY-ST-ZIP	MIAMI SHORES FL	DISCOURTE DE LA CONTRACTOR DE LA CONTRAC	2 4 CITY-	S1-7P		· · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	31 TITLE			Change	Addition	
NAME Street address			3 2 NAME	4000004				
CITY-ST-ZIP			3.3 STREET	i				
TITLE		DELETE	3.4. CITY- 4.1 TITLE	51 - filt		Change	Addition	
NAME		hand constant	4. 2 NAME			Onango	- Modition	
STREET ADDRESS			4.3 STHEE	ADDRESS				
CITY-ST-ZIP			4.4 CHY-5					
TITLE		DELETE	5.1 Tell#			☐ Change	Addition	
NAME			5.2 NAME	.				
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - S	i - ZIF				
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY - 5	1- Z(P				

14. 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 perporal on or the receiver or trustee empowered to execut, this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an alked hood with an address.