

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002414

1. Entity Name

THE SINGING MACHINE COMPANY, INC.

FILED

Apr 27, 2000 8:00 am  
Secretary of State

04-27-2000 90084 035 \*\*\*150.00

Principal Place of Business

Mailing Address

~~3101 NW 25TH AVE~~  
~~POMPANO BCH FL 33069~~  
US

~~3101 NW 25TH AVE~~  
~~POMPANO BCH FL 33073 3637~~  
US

2. Principal Place of Business

6601 LYONS RD

3. Mailing Address

6601 LYONS RD.

Suite, Apt. #, etc.

BUILDING A7

Suite, Apt. #, etc.

BUILDING A7

City & State

COCONUT CREEK FL

City & State

COCONUT CREEK FL

Zip

33073

Country

USA

Zip

33073

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

95-3795478

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STEELE, EDWARD  
3101 NW 25TH AVE  
POMPANO BEACH FL 33069

7. Name and Address of New Registered Agent

Name KLECHA, JOHN

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

6601 LYONS ROAD BUILDING A7

City COCONUT CREEK FL

Zip Code 33073

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

|                |                        |                                            |
|----------------|------------------------|--------------------------------------------|
| TITLE          | CD                     | <input type="checkbox"/> Delete            |
| NAME           | STEELE, EDWARD         |                                            |
| STREET ADDRESS | 3101 NW 25TH AVE       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL       |                                            |
| TITLE          | D                      | <input checked="" type="checkbox"/> Delete |
| NAME           | WU, PAUL               |                                            |
| STREET ADDRESS | 3101 NW 25TH AVE       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL       |                                            |
| TITLE          | TS                     | <input type="checkbox"/> Delete            |
| NAME           | KLECHA, JOHN           |                                            |
| STREET ADDRESS | 3101 NW 25TH AVE       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33069 |                                            |
| TITLE          | D                      | <input checked="" type="checkbox"/> Delete |
| NAME           | HASCAMP, WALTER        |                                            |
| STREET ADDRESS | 3101 NW 25TH AVE       |                                            |
| CITY-ST-ZIP    | POMPANO BEACH FL 33069 |                                            |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |                                            |
| STREET ADDRESS |                        |                                            |
| CITY-ST-ZIP    |                        |                                            |
| TITLE          |                        | <input type="checkbox"/> Delete            |
| NAME           |                        |                                            |
| STREET ADDRESS |                        |                                            |
| CITY-ST-ZIP    |                        |                                            |

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|                |                            |                                                                              |
|----------------|----------------------------|------------------------------------------------------------------------------|
| TITLE          |                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           |                            |                                                                              |
| STREET ADDRESS | 6601 LYONS RD. BLDG. A7    |                                                                              |
| CITY-ST-ZIP    | COCONUT CREEK FL 33073     |                                                                              |
| TITLE          |                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                            |                                                                              |
| STREET ADDRESS |                            |                                                                              |
| CITY-ST-ZIP    |                            |                                                                              |
| TITLE          |                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME           | 6601 LYONS RD. BUILDING A7 |                                                                              |
| STREET ADDRESS | COCONUT CREEK FL 33073     |                                                                              |
| CITY-ST-ZIP    |                            |                                                                              |
| TITLE          |                            | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           |                            |                                                                              |
| STREET ADDRESS |                            |                                                                              |
| CITY-ST-ZIP    |                            |                                                                              |
| TITLE          | DIRECTOR                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | JAY BAUER                  |                                                                              |
| STREET ADDRESS | 6601 LYONS RD. BUILDING A7 |                                                                              |
| CITY-ST-ZIP    | COCONUT CREEK FL 33073     |                                                                              |
| TITLE          | DIRECTOR                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME           | ALLEN SCHOR                |                                                                              |
| STREET ADDRESS | 6601 LYONS RD. BUILDING A7 |                                                                              |
| CITY-ST-ZIP    | COCONUT CREEK FL 33073     |                                                                              |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIRECTOR

4/19/00 (954) 596-1000

Date

Daytime Phone #

CR2E034 (9/99)