

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F94000004305

1. Corporation Name  
VALUE MUSIC CONCEPTS INC.

Principal Place of Business  
825-C FRANKLIN COURT  
MARIETTA GA 30067

Mailing Address  
825-C FRANKLIN COURT  
MARIETTA GA 30067

FILED  
Mar 17, 1999 8:00 am  
Secretary of State

03-17-1999 90078 001 \*\*\*150.00



DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

08/18/1994

4. FEI Number

58-2076390

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DPT  
NAME PERKINS, ROBERT G  
STREET ADDRESS 825-C FRANKLIN COURT  
CITY-ST-ZIP MARIETTA GA 30067

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

TITLE DS  
NAME PALLER, ROBERT I  
STREET ADDRESS 825-C FRANKLIN COURT  
CITY-ST-ZIP MARIETTA GA 30067

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

TITLE AS  
NAME PERKINS, JOAN U  
STREET ADDRESS 825-C FRANKLIN COURT  
CITY-ST-ZIP MARIETTA GA 30067

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

TITLE VPFT  
NAME THIRKELL, THOMAS J  
STREET ADDRESS 825 C FRANKLIN COURT  
CITY-ST-ZIP MARIETTA GA

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

TITLE VPM  
NAME POEHNER, BRIAN  
STREET ADDRESS 825-C FRANKLIN COURT  
CITY-ST-ZIP MARIETTA GA

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

TITLE VPO  
NAME SMITH, BRIAN  
STREET ADDRESS 825-C FRANKLIN COURT  
CITY-ST-ZIP MARIETTA GA

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/27/99

770-979-2115

CR2E034 (11/98)