PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90129 025 ***150.00

DOCUMENT # F94224

1, Corporation Name

DUNNE MUSIC COMPANT, INC.							
Principal Place	of Business	Mailing Address	•	,	T (EBIXED IND IDIX BIBID IIDIX IIDIX DI	tt Bilbin deute minte de	
2420 N ORANGE BLOSSOM TRAIL ORLANDO FL 32804-805 US		10107 182ND LANE SO BOCA RATON FL 33498 US		DO NOT WRITE II	N THIS SPACE		
					08/11/1982		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21	•	26			59-2240832		Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	* * * * * *	5 Additional Required
City & State	9	* City & State			6. Election Campaign Financing		00 May Be
23		28			Trust Fund Contribution	Add	ed to Fees
Zip	Country	Zip	Country		8. This corporation owes the current y	year Intangible ☐ Yes	√⊠Ño
24	25		30		Personal Property Tax. 10. Name and Address of New Regis		140
	9. Name and Address of Current	Registered Agent	. 81	Name	10. Name and Addices of New York.	, , , , , , , , , , , , , , , , , , ,	
RITZ. JENNIFER L							
10107 182ND LANE SOUTH			82	Street Addre	ess (P.O. Box Number is Not Acceptable)	,	
BOC	A RATON FL 33498		83		Lin Auton VIII		
			84	City		85 Z	Zip Code
				City		FL }	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m famillar with, and accept the obligat	of Florida. Such change was au	tnorized by	the corporatio	oration submits this statement for the purports board of directors. I hereby accept the	ose of changing a appointment as	its registered registered
SIGNATURE	Signature, typed or printed name of registered agent	t and title if anninable (NOTF: (Registered Agen	nt signature required	d when reinstating)	DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIREC	CTORS IN 12
TILE	PST	☐ DELETE	1.1 TITLE			☐ Chan	
NAME	RITZ, JENNIFER L		1.2 NAME				
STREET ADDRESS	10107 182ND LANE SOUTH		1.3 STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33498		1.4 CITY-ST	r-zip			
TITLE	V	, DELETE	2.1 TITLE			Chan	ige
NAME	COOK, DONALD G	K, DONALD G					
STREET ADDRESS	748 NW 47TH ST		2.3 STREET	ADDRESS			
CITY-ST-ZIP	POMPANO BCH FL		2.4 CITY+S	T-ZIP			- D & delision
TITLE	STP					~ Chan	ige Addition
NAME .	RITZ, JENNIFER L		3.2 NAME				
STREET ADORESS	10107 182ND LANE SOUTH		3.3 STREET	J			
CITY-ST-ZIP	BOCA RATON FL	□ per ete	3.4. CITY-S	T-ZIP		Chan	nge Addition
TITLE		☐ DELETE	4.1 TITLE				igo Dinagiaon
NAME		•	4.2 NAME				
STREET ADDRESS				TADORESS			
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST	I-ZIP		Char	nge Addition
TITLE			5.2 NAME				
NAME			5.3 STREET	ADDRESS			
STREET ADDRESS			5.4 CITY-ST				
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE	-+		☐ Chan	nge Addition
- NAME		_	6.2 NAME				
STREET ADDRESS			6.3 STREET	raddress			

CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP

SIGNATURE:



561-989-5522