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2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000005967

1. Entity Name

AEC Direct, Inc.

Principal Place of Business

4250 Coral Ridge Drive
Coral Springs, FL 33065

Mailing Address

4250 Coral Ridge Drive
Coral Springs, FL 33065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

105-0958529

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 reappointing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	Burke Ronald D.	☐ Delete
NAME	9130 W Sunset Blvd.	
STREET ADDRESS	Los Angeles, CA 90069	
CITY-ST-ZIP		

TITLE	DP	☐ Delete
NAME	Wersman, Eric	
STREET ADDRESS	4250 Coral Ridge Drive	
CITY-ST-ZIP	Coral Springs, FL 33065	

TITLE	VT	☐ Delete
NAME	Campana, George	
STREET ADDRESS	4250 Coral Ridge Drive	
CITY-ST-ZIP	Coral Springs, FL 33065	

TITLE	V	☐ Delete
NAME	Robbini, Larry	
STREET ADDRESS	4250 Coral Ridge Drive	
CITY-ST-ZIP	Coral Springs, FL 33065	

TITLE	VS	☐ Delete
NAME	Harst, Darren	
STREET ADDRESS	4250 Coral Ridge Drive	
CITY-ST-ZIP	Coral Springs, FL 33065	

TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

George Campana
SV P + Treasurer

05-03-01

Date

054-255-4066

Daytime Phone #

CR2E034 (11/00)

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ACCOUNT NO. : 072100000032

REFERENCE : 139382 4370467

AUTHORIZATION :

Patricia Piguit

COST LIMIT : \$ 150.00

ORDER DATE : May 4, 2001

ORDER TIME : 1:04 PM

ORDER NO. : 139382-005

CUSTOMER NO: 4370467

CUSTOMER: Ms. Silvia Inman
Alliance Entertainment Corp.
4250 Coral Ridge Drive

Coral Springs, FL 33065

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 MAY -4 PM 2:25
NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

ANNUAL REPORT FILING

NAME: AEC DIRECT, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sandra Mathis - Ext. 1165

EXAMINER'S INITIALS: _____