

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathison
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G97157 (3)

1. Corporation Name
MET RICHMOND RECORD SALES, INC.



Principal Place of Business
**11645 PRIVADO WAY
BOYNTON BCH FL 33437**

Mailing Address
**11645 PRIVADO WAY
BOYNTON BCH FL 33437**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**LAST, DAVID
7222 PINE MANOR DRIVE
LAKE WORTH FL 33463**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

3. Date Incorporated or Qualified **03/21/1984**
3a. Date of Last Report **04/04/1995**
4. FFI Number **11-1977288**
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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.01(4)(b) and 607.12(2), 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 is authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accepting obligation of, Sections 607.01(4)(b) and 607.12(2), Florida Statutes.

SIGNATURE **x**

David Last

Signature of the Agent or Director

Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	LAST, DAVID	
STREET ADDRESS	11645 PRIVADO WAY	
CITY-ST-ZIP	BOYNTON BCH FL	
TITLE	D	☐ DELETE
NAME	LAST, BEATRICE	
STREET ADDRESS	11645 PRIVADO WAY	
CITY-ST-ZIP	BOYNTON BCH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	☐ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY-ST-ZIP	☐ Change ☐ Addition
13.5 TITLE	
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY-ST-ZIP	☐ Change ☐ Addition
13.9 TITLE	
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY-ST-ZIP	☐ Change ☐ Addition
13.13 TITLE	
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY-ST-ZIP	☐ Change ☐ Addition
13.17 TITLE	
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or successor annual report is true and I acknowledge 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 I am adding to the list of officers and directors.

SIGNATURE: **x**

David Last

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)