FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY 12 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # G97419 (7)

1. Corporation Name
MR. MUSIC TRAVELING DISC JOCKEYS, INC.

Principal Place of Business	Mailing Address
5710 SW 164 TERR FT. LAUDERDALE FL 33331 US	5710 SW 164 TERR FT. LAUDERDALE FL 33331 US

3. Date Incorporated or Qualified: 03/28/1984
3a. Date of Last Report: 01/31/1994
4. FEI Number: 59-2384222 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business | 2a. Mailing Address
21 | 26
Suite, Apt. #, etc. | Suite, Apt. #, etc.
22 | 27
City & State | City & State
23 | 28
Zip 24 | Country 25 | Zip 29 | Country 30

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. The corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ABRAMS, BARRY 5710 SW 164 TERR FT. LAUDERDALE FL 33331	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 ____ Registered agent and date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ Change ☐ Addition
NAME	ABRAMS, BARRY	
STREET ADDRESS	5710 SW 164 TERRACE	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	S	☐ Change ☐ Addition
NAME	ABRAMS, DARCY	
STREET ADDRESS	5710 SW 164 TERR	
CITY-ST-ZIP	FT. LAUDERDALE FL	
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		

14. I 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)(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.

Barry Abrams

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

0236586 CP