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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # J55869

ROCK 'N ROLL RECORDS, INC.

	_		 _
Principal Place	of	Business	

Mailing Address

May 01, 1999 8:00 am Secretary of State

05-01-1999 90028 011 ***150.00

|--|--|

612 S. GREENWOOD AVENUE CLEARWATER FL 34616 CLEARWATER FL 34616		JE	DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualifed 01/29/1987	7,110 0, 7,102	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21	26		<u>59-2881167</u>	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 3375 Country	29 3337 9 0	Country 30	This corporation owes the current y Personal Property Tax.	ear Intangible Ves ☐ No	
9. Name and Address of C	urrent Registered Agent		10. Name and Address of New Regis	tered Age	
Hudik, Gregory B. 612 S. Greenwood Avenue Clearwater FL 34646	•	81 Street Ad 83 Street Ad	dress (P.O. Box Number is Not Acceptable)	tellents	
		1 - 1		FL 13325	
Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am familiar with, and accept the company of the section	LE FUINCE	is, the above samed couthorized by the corporal ida Statutes	COLVO - 17	ose of changing its registered appointment as registered	
<u> </u>	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
TITLE P	☐ DELETE	1.1 TITLE		Change	
NAME HUDIK, GREGORY B.		1.2 NAME	^ .		
STREET ADDRESS 612 S. GREENWOOD AVE	NUE	1.3 STREET ADDRESS)	6641 KIVERVIE	wr.	
CITY-ST-ZIP CLEARWATER FL	,,,,,,	1.4 CITY-ST-ZIP	6641 Rivervie	137204	
TITLE	DELETE	2.1 TITLE	astronom -	Change Addition	
NAME		2.2 NAME			
		2.3 STREET ADDRESS	•		
STREET ADDRESS			•		
CITY-ST-ZIP	□ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition	
TITLE	_ Deterit	i i	•		
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4. CITY-ST-ZIP		☐ Change ☐ Addition	
TIME	DELETE	4.1 TITLE		Li change Adollor	
NAME	-	4. 2 NAME _		_	
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CITY-ST-ZIP	·	4.4 CITY-ST-ZIP		DAME: DAME:	
TITLE -	☐ DELETE	5.1 ππ . Ε	•	☐ Change ☐ Addition	
NAME		5.2 NAME	,	•	
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP'		5.4 CITY-ST-ZIP			
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME .	* * * * * * * * * * * * * * * * * * *	6.2 NAME	•	•	
STREET ADDRESS	· ·	6.3 STREET ADDRESS	•		
C/TY-ST-ZIP		6.4 CITY- \$T-ZIP			
1 GHT-01-4F /		- 1			

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 601, 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: