

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 JUN 21 AM 9:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

L00000000176

1. Entity Name

ARTMAN RECORDS LLC

Principal Place of Business

Mailing Address

178 GREENTREE CIR.

2. Principal Place of Business

3. Mailing Address

PO BOX 1202

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JUPITER FL

4. FEI Number

52-2213047

Applied For

Not Applicable

Zip

Country

Zip

Country

33468

FLA. BOKH

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ARTHUR C RING
178 GREENTREE CIRCLE
JUPITER FL 33458

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

Arthur C Ring

05/01/00

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS
TITLE: PRESIDENT
NAME: ARTHUR C RING
STREET ADDRESS: 178 GREENTREE CIRCLE
CITY-ST-ZIP: JUPITER FL 33458

Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

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TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

Delete

10. ADDITIONS/CHANGES
TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
9000003301989-5
-06/23/00-01004-004
*****55.00 *****55.00

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Arthur C Ring

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (11/99)