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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M20341

(7)

TARGET MUSIC DISTRIBUTORS, INC.

(BAIDAI) (12 11611 ARIDA (1111 DIRBY 1101 AIDH) AIDH DIÀIN #1011 AIDH AIDH

FILED

Mar 17 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address							
7925 NW 66 ST MIAMI FL 33166	7925 NW 66 ST MIAMI FL 33166			. DO NOT WRITE IN THIS SPACE			
				3. Date incorporated or Qualified 09/09/1985			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For		
21	26	26		59-2580844	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.				sd S8.75 Additional Fee Required		
City & State	City & State	⊢ ′		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Feas			
Zip Counti	·	Country 30		8. This corporation owes or has paid the currer Personal Property Tax due June 30.			
	ess of Current Registered Agent	10. Name and Address of New Registered Ag	ent				
KULLA, GARY		81	Name				
7925 NW 66 ST. MIAMI FL 33166		82	Street Address (P.O. Box Number is Not Acceptable)				
		83					
		84		<u> </u>	85 Zip Code		
11. Pursuant to the provisions of Sec	ctions 607.0502 and 607.1508, Florida Statutes	s, the abov	e-named corp	poration submits this statement for the purpose of ch	nanging 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 a	m familiar with, and accept the obligations of, Section 607	.0505, Florid	la Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: R	egistered Agent signature requir	red when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF		IS IN 12
TITLE	DP 🗆 🗅 DI	ELE te	1.1 TITLE		Change	Addition
NAME	KULLA, GARY		1.2 NAME			
STREET ADDRESS	7925 NW 66 ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE	D	ELETE	2.1 TITLE	:	Change	Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE	□ D	ELETE	3.1 TOLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE	DI	ELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	_		4.4 CITY-ST-ZIP			
TITLE	□ Di	ELET E	5.1 TITLE		☐ Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE	☐ DE	ELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-7IP			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.