

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0078142 AV

DOCUMENT # M22706

1. Entity Name

WINTER MUSIC CONFERENCE INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 SEP 10 AM 8:00

Principal Place of Business

3450 N.E. 12 TERR.

FT LAUDERDALE FL 33334

Mailing Address

3450 N.E. 12 TERR.

FT LAUDERDALE FL 33334

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

MRS

4. FEI Number

59-2606777

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POSSENTI, LOUIS GERALD

3450 N.E. 12 TERR.

FT LAUDERDALE FL 33334

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V
NAME KELLY, JR., WILLIAM L
STREET ADDRESS 154 NE 23 STREET
CITY-ST-ZIP MIAMI FL 33137

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE PTS
NAME POSSENTI, LOUIS GERALD
STREET ADDRESS 4410 NE 25 AVE
CITY-ST-ZIP FORT LAUDERDALE FL 33308

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

600022934256
09/10/03--01064--026 **558.75

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Louis G. PosSENTI
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-8-03

954-563-4444

Date

Daytime Phone #

CR2E034 (4/03)