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 #

(9)

MUSIC ENTERTAINMENT, INC.

FILED

May 13 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address						- I TOBERBON IND FORM CORN TOWN OTTO VIET DIDIL OND I BIDER BEDIN DI	111 Q1313 (801	
9518 S.W. 8 ST. PEMBRICKE PINES FL 33025			9516 S.W. 8 ST. PEMBROKE PINES FL 33025			DO NOT WRITE IN THIS SPACE		
							3. Date Incorporated or Qualified	
2. Principal Pl	ace of Business	20	. Mailing Address				07/31/1988 4. FEI Number	nlind Cor
21		26	. Walling Addition					Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 A	
22		27					Fee Rec	quired
City & State)		City & State				6. Election Campaign Financing \$5.00 Trust Fund Contribution Added to	
Zip	Country	28]	Zip	Count	try		Trust Fund Contribution Added to 8. This corporation owes or has paid the current year Inta	
24	25	29	·	30	•			No
	g. Name and Address of Curre	nt Regis	tered Agent				10. Name and Address of New Registered Agent	
	Oughtaling, Frank			6	11	Name		
	516 SW 8 STREET			6	12	Street Addre	ss (P.O. Box Number is Not Acceptable)	
M	EMBROKE PINES FL 33025			-	3			
				8	4	City	□ 85 Zip C	ode
11. Pursuani t	o the provisions of Sections 607.05	02 and 6	07.1508, Florida Stati	utes, the abo	L	-named corpo	visition submits this statement for the purpose of changing its	registered
office or re agent. I ar	egistored agent, or both, in the Stat in familiar with, and accept the obli	e of Ekino gations of	da. Such change was f, Section 607.0505, F	authorized Iorida Statut	by les	the corporation.	on's board of directors. I hereby accept the appointment as r	egistered
SIGNATURE		_						
12.	Signature, typed or printed name of registered a OFFICERS AT				ger	nt signature required		NA 45
TITLE	P	ALT DIVE C	DELETE	13.	F		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Change	Addition
NAME	HOUGHTALING, FRANK			1.2 NAM			shango	
STREET ADDRESS	9516 SW 8TH ST.					ADDRESS		
CITY - ST - ZIP	PEMBROKE PINES FL			1.4 CITY	-51	T- ZIP		
TITLE	\$		☐ DELETE	2.1 T(TLE	E		☐ Change	Addition
name	HOUGHTALING, DARIA			2.2 NAM	E			
STREET ADDRESS	9516 SW 8TH ST.			2.3 STRE	ET /	ADDRESS		
CITY+ST-ZIP	PEMBROKE PINES FL		Decemen	2. 4 CITY	_	T-ZIP		
TITLE	I HOLIGUTALING ALVOCA		☐ DELETE	3.1 TITLE			L. Change	Addition
NAME STREET ADDRESS	HOUGHTALING, ALYSSA 9516 SW 8TH ST.			3 2 NAM		1000cce		
CITY-ST-ZIP	PEMBROKE PINES FL			3.3 STRE 3.4. City		ADORESS		
TITLE	· marine and the fill of the		☐ DELETE	4.1 TITLE		1 - ZIF	Change	Addition
NAME				4. 2 NAM				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP				4.4 City	- ST	r-zip		
TITLE			☐ DELETE	5.1 TITLE	=		☐ Change	Addition
NAME				5.2 NAM	E			
STREET ADDRESS						ADDRESS		
CITY - ST - ZIP			T AFLEYE	5.4 CITY		I - ZIP		-
TITLE			☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME ATORET ADADTOS				6.2 NAM				
STREET ADDRESS						ADDRESS		
CITY-ST-ZIP	ertify that the information supplied	with this fi	iling does not qualify	6.4 City for the exem			ection 119.07(3)(i), Florida Statutes. I further certify that the i	nformation

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