## FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 17, 2001 8:00 am Secretary of State DOCUMENT # N9600006580 1. Entity Name 05-17-2001 90375 050 \*\*\*\*61.25 SONGWRITERS IN THE ROUND, INC. Principal Place of Business Mailing Address 5101 COLLINS AVENUE. SUITE 10-H 3801 N FEDERAL HWY 550951 MIAMI BEACH FL 33140 POMPANO BEACH FL 33064 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0711194 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MAHONEY, ROBERT F CPA 3801 N. FEDERAL HIGHWAY POMPANO BEACH FL 33064 Zip Code FL 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE Addition TITLE TD NAME NAME **BRENT, CHARLES** STREET ADDRESS STREET ADDRESS 5101 COLLINS AVENUE, SUITE 10-H CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33140-2726 TITLE ☐ Addition TITLE Delete DESMIND CHILD DA. NAME CHILD, DESMOND STREET ADDRESS STREET ADDRESS 6401 PINETREE DRIVE CIRCLE CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL TITLE TITLE ☐ Delete MORASKIE, ELLEN NAME NAME STREET ADDRESS STREET ADDRESS 763 COLLINS AVE., #301 CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 Delete TITLE TITLE JESSICA REYES 420 LINCOLN RP, STE 66/ HARTIGAN, CHRYSTAL NAME NAME STREET ADDRESS 1735 N E 149TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33181 Delete TITLE TITLE NAME SWIHURA, EDWARD J III NAME STREET ADDRESS 21133 S W 85TH AVENUE #113 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33189 TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 of the same owered if execute this report as required by Chapter 617, 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.

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N MONOSKIE 4/19/0/ 305-534-10/