

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000025230

Entity Name: DICE RECORDS, INC.

FILED
Feb 03, 2005
Secretary of State

Current Principal Place of Business:

4823 SILVER ST RD
SUITE 140
ORLANDO, FL 328033280 8

New Principal Place of Business:

Current Mailing Address:

4823 SILVER ST RD
SUITE 140
ORLANDO, FL 328033280 8

New Mailing Address:

825 CAMPELLO ST
ALTAMONTE SPRINGS, FL 32701 8

FEI Number: 59-3634033

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMAS, ROBERT A JR
825 CAMPELLO ST
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

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: ROBERT A. THOMAS, JR.

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: THOMAS, ROBERT A JR
Address: 525 CAMPELLO STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP () Delete
Name: THOMAS, JACQUELINE
Address: 4910 MALARKEY ST
City-St-Zip: ORLANDO, FL 32808

Title: S () Delete
Name: TAYLOR, JACQUELINE
Address: 4910 MALARKEY STREET
City-St-Zip: ORLANDO, FL 32808

Title: T () Delete
Name: THOMAS, CORINE
Address: 825 CAMPELLO STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: THOMAS, CORINE
Address: 825 CAMPELLO STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT A. THOMAS, JR.

CEO

02/03/2005

Electronic Signature of Signing Officer or Director

Date