

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 13, 2001 8:00 am  
Secretary of State

04-13-2001 90049 010 \*\*\*150.00

DOCUMENT # P00000035874

1. Entity Name  
HEADQUARTERS RECORDS, INC.

Principal Place of Business

1468 N. MANGOMIA DRIVE  
WEST PALM BEACH FL 33401

Mailing Address

1468 N. MANGOMIA DRIVE  
WEST PALM BEACH FL 33401

2. Principal Place of Business

5425 54th way  
Suite, Apt. #, etc.

3. Mailing Address

5425 54th way  
Suite, Apt. #, etc.

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33409

Country

USA

Zip

33409

Country

USA

4. FEI Number

"Applied for"

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WATKINS, JERMAIN  
1468 N. MANGOMIA DRIVE  
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name: Gaila M. Anderson, Esquire  
Street Address (P.O. Box Number is Not Acceptable): 1031 Ives Dairy Road, Suite 228  
City: North Miami Beach, FL Zip Code: 33179

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: Gaila M. Anderson Corporation Counsel Date: 4-5-01  
(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. \$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LEWIS, INA	
STREET ADDRESS	1468 N. MANGOMIA DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE	D	<input type="checkbox"/> Delete
NAME	WATKINS, JERMAIN	
STREET ADDRESS	1468 N. MANGOMIA DRIVE	
CITY-ST-ZIP	WEST PALM BEACH FL 33401	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joseph Nambary	
STREET ADDRESS	1477 Mangomia Drive	
CITY-ST-ZIP	West Palm Beach, FL 33401	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jeanine Watkins	
STREET ADDRESS	5425 54TH WAY	
CITY-ST-ZIP	West Palm Beach, FL 33409	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Thomas Stewart	
STREET ADDRESS	5425 54TH Way	
CITY-ST-ZIP	West Palm Beach, FL 33409	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jermain Watkins  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/01 (561) 616-9342  
Date Daytime Phone #

CR2E034 (10/00)