

8/31/01-90001-047-\$550.00-\$550.00

# 2001-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000036724

1. Entity Name  
GHETTO STYLE MUSIC, INC.

Principal Place of Business  
231 12TH ST., STE. 3  
MIAMI BEACH FL 33139

Mailing Address  
231 12TH ST., STE. 3  
MIAMI BEACH FL 33139

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ 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

CAMPBELL, STANLEY

231 12TH ST., STE. 3

MIAMI BEACH FL 33139

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

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 \$550.00**  
**After September 12, 2001 Fee will be \$750.00**  
**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 type="checkbox"/> Delete
NAME	CAMPBELL, STANLEY	
STREET ADDRESS	231 12TH ST., STE. 3	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
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		
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 type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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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 as of the date of filing. 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 an officer or director empowered.

SIGNATURE:

**NOTARIAL SIGNATURE REQUIRED**

8/10/2001

Date

305 532-7696

Daytime Phone #

CR2E034 (5/01)

0000817 AV

FILED

01 DEC 10 PM 12:20

SECRETARY OF STATE



DO NOT WRITE IN THIS SPACE

**Ghetto Style Records**  
**231 12<sup>th</sup> Street**  
**Miami Beach, Florida 33139**

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*zel*

December 6, 2001

**Florida Department of State**  
**Division of Corporation**  
**P.O. BOX 6327**  
**Tallahassee, FL 32314**

**Dear Sir or Madame:**

**Enclosed is our Uniform Business Report. I have made the necessary corrections. I apologize for the delay in returning the UBR, it went to the wrong department and I am just receiving the report.**

**Thank You,**

*DM*

**Donna Moore**  
**Controller**