

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90419 027 ***150.00

DOCUMENT # P00000064591

1. Entity Name
ROO RECORD COMPANY, INC.



Principal Place of Business
~~2000 GEORGIA AVENUE #L75~~
~~WEST PALM BEACH FL 33405~~

Mailing Address
~~2000 GEORGIA AVENUE #L75~~
~~WEST PALM BEACH FL 33405~~

2. Principal Place of Business
8209 SPYGLASS DRIVE
Suite, Apt. #, etc.

3. Mailing Address
8209 SPYGLASS DRIVE
Suite, Apt. #, etc.

City & State
WEST PALM BEACH, FL

City & State
WEST PALM BEACH, FL

4. FEI Number **65-1041933**

Applied For
Not Applicable

Zip
33412

Country

Zip
33412

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

GRIFFIN, EDWARD R
~~2000 GEORGIA AVE #L75~~ **8209 SPYGLASS DRIVE**
~~WEST PALM BEACH FL 33405~~ **33412**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIFFIN, EDWARD R 2000 GEORGIA AVENUE #L75 8209 SPYGLASS DR WEST PALM BEACH FL 33405 33412	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 or trustee empowered to execute this report as required by Chapter 607, 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.

SIGNATURE:

Edward R. Griffin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/03

561-627-7171

Date

Daytime Phone #

CR2E034 (10/02)