2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000074945 **DOCUMENT #**

1. Entity Name

IT'S NOT ABOUT MUSIC, INC.



FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90216

Principal Place of Business 2401 S OCEAN DR HOLLYWOOD FL 33019 Mailing Address 2401 S OCEAN DR HOLLYWOOD FL 33019					'				
Principal Place of Business 3. Mailing Address					7	i 1001/1003 ili kusil melis nacil nesi		iti didin tatti an	PE: 8131 1841
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				CHECK HERE IF	MAKING (
City & State		City & State			4. FE	65-1031427	:	Not	Applicable
Zip	Country	Zip	Coun	try	5. Ce	rtificate of Status Desired		8.75 Addit ee Required	
	6. Name and Address of Currer	nt Registered Agent		المساح	7. Na	me and Address of New Re	gistered A	gent	
	O. Name and Address of Control			Name		1			
	N, DANIEL B			Street Addres	s (P.O. Bo)	(Number is Not Acceptable)			
2401 S OC									_
HOLLYWO	OOD FL 33019		1	City			FL	Zip Code	1
			A ite register	red office or regis	stered age	nt, or both, in the State of Flo	rida. I am fa	amiliar with, a	and accept
8. The above the obligation	named entity submits this statement ons of registered agent	t for the purpose of chargor	ng its register	ed office of regio	stored age	2/1/0	3		
SIGNATURE _		and still depolerable	(NOTF: Register	ed Agent signature requ	uired when rain	stating)	DATE		
	Signature, typed or printed name of registered g	gent and the it applicable.			T				
	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.0	00				Election Campaign Fin Trust Fund Contribution		\$5.00 Added	0 May Be to Fees
Make Check	Payable to Florida Department	t of State				DITIONS/CHANGES TO OFF	ICERS AND	DIRECTORS	3 IN 11
10.	OFFICERS AN	ND DIRECTORS	11		ADL	JITIONS/CHANGES TO OFT	IOEI IO 7 II II	☐ Change	Addition
TITLE	P DANIEL D	☐ Delete		ME .				_	
NAME	LIEBERMAN; DANIEL B 2401 S OCEAN DR			REET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	HOLLYWOOD FL 33019		сп	TY-ST-ZIP					_ <u>_</u>
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NAME STREET ADDRESS			s	TREET ADDRESS					
CITY-ST-ZIP	<u>'</u>			CITY-SI-ZIP		······································			
		with this filing dogs not of	ualify for the e	exemplion stated	in Section	119.07(3)(i), Florida Statutes	. I further ce	rtify that the	intermation

or stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information shall have the same legal effect as if made under oath; that I am an officer or director by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information supplied with this filing does not indicated on this report or supplemental report is true and acquirate of the corporation or the receiver or trustee empowered to execute the changed, or on an attachment with an address, with all other like empower. nat my signature acdurate and execute this

SIGNATURE:

SIGNAT

Daytime Phone #