2000	UNIFORM BUS	INESS	REPOF	: RT (UBR)			FILE)	ATX1
DOCUMENT # P00000078545						02 JUL 15 PM 12: 53			
1. Entity Name									
SO WHAT RECORDS INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place	of Business	Mailing A	Address					,,	
1801 E COI #107	LONIAL DR		•			000	00644 -07/16/02-	8490-	O
ORLANDO.	FL 32803						****150.0	n ****15	50.00
	lace of Business	3. Mailing A	ddress					-	
1801 E CO	LONIAL DR	2110 JAM						_	
Suite, Apt.	#, etc.	Suite, Ap	ot. #, etc.			DO NOT WE	RITE IN THIS SPAC	E	
107 City & Stat		City & St	ate			4. FEI Number		Applied For	٦
ORLANDO,		OVIEDO.		59-3661346		Not Applicable			
Zip.	Country	Zip		Country		5. Certificate of Status Desir	ed \$8.75	Additional	
32803	USA	32765		JSA			Fee Requi		
	6. Name and Address of Currer	nt Registered A	\gent		-	7. Name and Address of Nev	w Registered Agen	t	-
LOCTON	A DVI			Name	ΝΠΔΙ	SAI			
LOFTON, DARYL LOFTON, I Street Address						P.O. Box Number is Not Acceptable)			
1801 E COLONIAL DR 2110 JA					MES.				
#107									1
ORLANDO,	FL 32803								_
		9		City	_			Code 2765	
	named entity submits this stateme	at for the nume	an of chancing	OVIEDO		istered agent or both in the S		.703	1
8. The above	named entity submits this staterile		se or crianging	·	e or reg	istered agent, or bour, in the c	1210 OF 1 10100	05/02	ļ
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	Signature, typed or plinted name of re	gistered agent an				ent signature required when reinsta		\$5.00	4
•	ration is eligible to satisfy its Intan-			FEE IS \$150.00		10. Election Campaign F		•	
	ling requirement and elects to do s	100000000000000000000000000000000000000		iQ Fee will be \$55 e to Department		Trust Fund Contribut	ion, iviay bi	e Added to Fees	
(See criteri		ID DIRECTORS		12.		IONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 11]
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NAME	LOFTON., DARYL			NAME	1	ron, daryl			6)
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CITY - ST - ZIP	ORLANDO, FL 32819 -	.		- CITY - ST - ZIP				·	_
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40 ()	I ertify that the information supplied v	vith this filing do	es not qualify f	or the exemption	stated in	Section 119.07(3)(i), Florida S	Statutes, I further ce	rtify that the nath: that	
Low on off	n indicated on this report or supplied to indicated on this report or supplier icer or director of the corporation of	r the receiver or	r trustee empoy	vered to execute t	his repo	it as required by Unapter 607,	Florida Statutes; an	d that my	
name appe	ears in Block 11 or Block 12 if chan	ged, of on an a	ttachment with	an address, with	all other	like empowered.	-1		1
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07/05/02

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

To Whom It May Concern; --

This letter is to inform that SO WHAT RECORDS INC., has relocated. The named Corporation did not receive a Annual Corporate Report. Due to these circumstances we are asking that you abate the reinstatement fees.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,

Maurice Robinson

Robinson Accounting of America Inc.