

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P00000109427**

1. Entity Name

BLAZED OUT RECORDS INC.**FILED**
Apr 25, 2001 8:00 am
Secretary of State

04-25-2001 90100 049 ***158.75

Principal Place of Business

Mailing Address

**2201 OGLESBY AVE
WINTER PARK FL 32789****PO BOX 547537
ORLANDO FL 32854**

2. Principal Place of Business

1410 SEMORAN BLVD.

3. Mailing Address

P.O. BOX 547537

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CASSELBERRY, FLORIDA

City & State

ORLANDO, FLORIDA

4. FEI Number

59-3694560

Applied For

Not Applicable

Zip

32707

Country

UNITED STATES

Zip

32854

Country

US5. 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

**PEDROZA, WILFREDO JR
2201 OGLESBY AVE
WINTER PARK FL 32789**

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 reinstating)

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition

P
EDMUNDO CARABALLO
2105 HOWELL BRANCH RD. APT 28G
MAITLAND, FL 32751

VICE PRESIDENT / M
WILFREDO PEDROZA JR
2201 OGLESBY AVENUE
WINTER PARK, FL 32789

S
KELVIN PEDROZA
2201 OGLESBY AVENUE
WINTER PARK, FL 32789

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: Wilfredo Pedroza Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/01

Date

407-647-8916

Daytime Phone #

CR2E034 (10/00)