## Feb 07 2002 8:00 am

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**2002 UNIFORM BUSINESS REPORT (UBR)** 

DOCUMENT # P0100023041  1. Entity Name GEREMY MILLER MUSIC, INC.					Secretary of State 02-07-2002 90036 005 ***150.00		
Principal Place of Business 2441 N.E. 9TH TERRACE POMPANO BEACH FL 33064		Mailing Address 2441 N.E. 9TH TERRACE POMPANO BEACH FL 33064				11 <b>/ 11</b> 1	
2. Principal Place of Business		3. Mailing Address			L HOUSENESS HIS COURT HIGH COURT OLING COURT COURT OFFICE AND COURT COURT COURTS HI		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State			4. FEI Number 65-1085379   Applied   Not Ap	for plicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired		
	Name and Address of Current	Registered Agent	d Agent		7. Name and Address of New Registered Agent		
d. Hallo sila Assabso di San dik nagata a Agent				Name			
MILLER, GEREMY 2441 N.E. 9TH TERRACE				Street Address (P.	t Address (P.O. Box Number is Not Acceptable)		
POMPANO BEA							
	,			City	FL Zip Code		
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE: the signature of the purpose of changing its results of the purpose			!! FEE 02 Fee v	vill be \$550.00	10. Election Campaign Financing \$5.00 M		
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	11	
STREET ADDRESS 2441	D Delete MILLER, GEREMY  PRESS 2441 N.E. 9TH TERRACE			ET ADDRESS ST-ZIP		Addition Addition	
NAME STREET ADDRESS CITY-ST-ZIP		Donge	NAME STREE CITY-	T ADDRESS ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Change C	Addition	
TITI F		☐ Delete	TIT) F		Change C	Addition	

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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE: >

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

☐ Delete

Change

Addition