

**2002 UNIFORM BUSINESS REPORT (UBR)**

FILED

**FILED**  
**Oct 07, 2002 8:00 A.M.**  
**Secretary of State****DOCUMENT # P01000029494**1. Entity Name  
**MUSIC TIMES RECORDS, INC.**Principal Place of Business  
**6306 PEMBROKE ROAD  
MIRAMAR FL 33023**Mailing Address  
**6306 PEMBROKE ROAD  
MIRAMAR FL 33023**

2. Principal Place of Business

**Broward County**

Suite, Apt. #, etc.

3. Mailing Address

**6306 Pembroke Rd.**

Suite, Apt. #, etc.

City &amp; State

**Miramar FL**

City &amp; State

4. FEI Number

**65-1088724**

Applied For

Not Applicable

Zip

**33023**

Country

**USA**

Zip

Country

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

6. Name and Address of Current Registered Agent

**CHASE, BARRY O ESQ.****% LAW OFFICE OF BARRY OLIVER CHASE, P.A.  
ONE S.E. 3RD AVE., SUITE 1800  
MIAMI FL 33131**

7. Name and Address of New Registered Agent

Name  
**George + Sonda Simpson**Street Address (P.O. Box Number is Not Acceptable)  
**6306 Pembroke Rd**City  
**Miramar**

FL

Zip Code  
**33023**

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 **George Simpson**

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
SIMPSON, GEORGE  
285 N.E. 185TH STREET SUITE 6  
MIAMI FL 33179** ☒ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SVD  
SIMPSON, SONDA  
285 N.E. 185TH STREET SUITE 6  
MIAMI FL 33179** ☒ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PTD  
Simpson, George  
6306 Pembroke Rd.  
Miramar, FL 33023** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SVD  
Simpson, Sonda  
6306 Pembroke Rd  
Miramar, FL 33023** ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ 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.

SIGNATURE: **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)