2002 UNIFORM BUSINESS REPORT (UBR)

May 17, 2002 8:00 am Secretary of State DOCUMENT # P01000080317 1. Entity Name SEVENDUST RECORDS, INC. 05-17-2002 90008 012 ***150.00 Principal Place of Business Mailing Address C/O JEFF HANSON MANAGEMENT AND PROMOTIONS C/O GARRY D. WHITFIELD, CPA 15 S. ORANGE AVE. 1261 LINCOLN AVE., STE, 216 ORLANDO FL 32801 SAN JOSE CA 95125 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCNEELY, ROBERT A ESQ Street Address (P.O. Box Number is Not Acceptable) MCFARLAIN & CASSEDY, P.A. 215 S. MONROE ST, STE. 600 TALLAHASSEE FL 32301 City 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax filing requirement and elects to do so. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 \$5.00 May Be (See criteria on back) Trust Fund Contribution. Make Check Payable to Department of State Added to Fees 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Addition NAME WITHERSPOON, LAJON NAME STREET ADDRESS 15 S. ORANGE AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP ☐ Delete ☐ Change NAME Addition LOWERY, CLINT NAME STREET ADDRESS 15 S. ORANGE AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME CONNOLLY, JOHN STREET ADDRESS 15 S. ORANGE AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CONNOLLY, JOHN NAME STREET ADDRESS 15 S. ORANGE AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP TITLE D ☐ Delete TITLE Change ☐ Addition NAME HORNSBY, VINCE NAME STREET ADDRESS 15 S. ORANGE AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP TITLE ח ☐ Delete TITLE □ Change ☐ Addition ROSE, MORGAN NAME STREET ADDRESS 15 S. ORANGE AVE. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801

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 eport 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 thusee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

CITY-ST-ZIP

SIGNATURE:

(9/01)

FILED