2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT #

P02000015679

1. Entity Name

TE'NAJ RECORD COMPANY



FILED Feb 24, 2003 8:00 am Secretary of State

02-24-2003 90231 026 ***158.75

Principal Place of Business 12025 LAKE CYPRESS CIR. STE. 106 12025 LAKE CYPRESS CIR. STE. 106 ORLANDO FL 32828 ORLANDO FL 32828			RESS CIR STE. 106 28		A MARIKERI INI ARIKA MIRIK ARIKI AR	11) 20)) 20)0 1 17 00 1 2 1	18 40 - 1 888 - 1888 - 18	ili (Hi
2. Principal	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE	IF MAKING CHA	ANGES	
City & State		City & State			4. FEI Number Applied For			
Zip Country		Zip Counti		i i	OF Certificate of Status Desired	\$8.75 Additional Fee Required		
77.	6. Name and Address of Current I	Registered Agent		7.	Name and Address of New P	/ 7 Fee F		
KENNEDY, RASHEEDA S 12025 LAKE CYPRESS CIR., STE. 106 ORLANDO FL 32828				Name: Rashceda S: Denning Street Address (P.O. Box Number is Not Acceptable) 12025 Lake Cypress Cir., STE. tob				
			City	rlando		FL Z	ip Code	
SIGNĄŢŮRE	Signature, typical printed name of registered agent as FILE NOW!!! FEE IS \$150.00	my Secre	registered office	or registered ag	ent, or both, in the State of Flo	2/13/03		
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					Trust Fund Contribution	· ·	\$5.00 Mag Added to Fe	
10.	OFFICERS AND D		11.		DITIONS/CHANGES TO OFFI	CERS AND DIRE	CTORS IN 1	1
NAME STREET ADDRESS CITY-ST-ZIP	PST KENNEDY, RASHEEDA S 12025 LAKE CYPRESS CIR., STE. ORLANDO FL 32828	Delete 106	TITLE NAME STREET ADDRESS CITY-ST-ZIP	12025	A. Denning Lake Cypress Cr. do, FL 32828	STE. 106	· –	F034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KIMBROUGH, PATRICK C 12025 LAKE CYPRESS CIR., STE. ORLANDO FL 32828	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Rasha	Lake Cypres do, FL 328	Serist		Addition
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TITLE NAME	•	☐ Delete	TITLE			Cha	ange 🔲 Ac	dition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

D'Rasheeda S. Denning