

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 04, 2003 8:00 am**  
**Secretary of State**

06-04-2003 90100 022 \*\*\*150.00

**DOCUMENT # P02000079636**

1. Entity Name  
**FRED SILVER MUSIC.COM, INC.**



Principal Place of Business  
**1800 S OCEAN BLVD #107  
POMPANO BEACH FL 33064-7915**

Mailing Address  
**1800 S OCEAN BLVD #107  
POMPANO BEACH FL 33064-7915**

2. Principal Place of Business

**6559 Pondapple Rd**

Suite, Apt. #, etc.  
**Boca Raton, FL**

City & State

Zip  
**33433**

Country

3. Mailing Address

**6559 Pondapple Rd**

Suite, Apt. #, etc.  
**Boca Raton, FL**

City & State

Zip  
**33433**

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

**22-3861609**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CLAYMAN, CARYN J ESQ  
7015 BERACASA WAY STE 201  
BOCA RATON FL 33433**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete  
NAME **SILVER, FRED**  
STREET ADDRESS **1800 S OCEAN BLVD #107**  
CITY-ST-ZIP **POMPANO BEACH FL 33064-7915**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **6559 Pondapple Rd**  
CITY-ST-ZIP **Boca Raton, FL 33433**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**(561) 482-2225**

CR2E034 (10/02)

ATTACHMENT  
86124421  
P02000079636

**FRED SILVER**

**www.fredsilver.org**

**6559 Pondapple Road**

**Boca Raton, FL 33433**

**Phone: (561) 482-2225**

**Fax: (561) 482-2030**

**Cell: (561) 703-8316**

**Email: drmusic63@aol.com**

**Uniform Business Report  
Division Of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500**

**June 2, 2003**

**. To Whom It May Concern:**

**I am late in filing my UBR due to the following situations:**

- 1. I was hospitalized twice during February 2003 requiring a pacemaker which had to be installed twice and quite ill afterwards. At the same time I closed on the sale of my condo at 1800 South Ocean Boulevard/ Lauderdale By The Sea, FL 33602 and closed on the purchase of my house at 6559 Pondapple Road/ Boca Raton, FL 33433.**
- 2. Because of the move all my papers were in cartons and boxes. Other people had to pack for me and move me. I had to rent space until I was able to move on April 2, 2003 and therefore didn't have access to my papers.**
- 3. The week after the move I was diagnosed with pleurisy and it has taken six weeks to recover from that.**

**I have medical records from medicare and my health insurance company as well as copies of my closing papers to back up these facts. Because I have been too ill to run my business until now I cannot afford the \$550.00 penalty fee for late filing. I am enclosing \$150.00 and hope that will be satisfactory this one time.**

**Thank you for your patience and indulgence in this matter.**

**Sincerely Yours,**



**Fred Silver**