

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 06, 2004 8:00 am**  
**Secretary of State**

05-06-2004 90185 024 \*\*\*150.00

DOCUMENT # P02000106002

1. Entity Name  
GRIND TYME RECORDS, INC.



Principal Place of Business  
3813 NORTH NEBRASKA AVENUE  
TAMPA, FL 33603

Mailing Address  
3813 NORTH NEBRASKA AVENUE  
TAMPA, FL 33603

24072377

2. Principal Place of Business  
5902 Straton Park Dr.

3. Mailing Address  
P.O. Box 20272

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04262004 Chg-P CR2E034 (10/03)

City & State  
Tampa, FL

City & State  
Tampa, FL

4. FEI Number 56-2372177  
~~XXXXXXXXXX~~

Applied For  
Not Applicable

Zip  
33617

Country  
Hills

Zip  
33622

Country  
Hills

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STAMPS, DAVID  
501 EAST KENNEDY BOULEVARD  
1700  
TAMPA, FL 33602

Name  
Ronald Coffie, Jr.

Street Address (P.O. Box Number is Not Acceptable)  
5902 Straton Park Drive

City  
Tampa

FL Zip Code  
33617

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 *Ronald Coffie, Jr.*

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

(NOTE: Registered Agent signature required when reinstating)

4-26-04  
DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete  
NAME CAFFIE, RONALD JR  
STREET ADDRESS 3813 NORTH NEBRASKA AVENUE  
CITY-ST-ZIP TAMPA, FL 33603

TITLE PD ☒ Change ☐ Addition  
NAME Ronald Coffie, Jr.  
STREET ADDRESS P.O. Box 20272  
CITY-ST-ZIP Tampa, FL 33622

TITLE VPD ☒ Delete  
NAME DAVIS, IAN  
STREET ADDRESS 3813 NORTH NEBRASKA AVENUE  
CITY-ST-ZIP TAMPA, FL 33603

TITLE VPD ☒ Change ☐ Addition  
NAME Ian Davis  
STREET ADDRESS P.O. Box 20272  
CITY-ST-ZIP Tampa, FL 33622

TITLE STD ☒ Delete  
NAME STAMPS, DAVID  
STREET ADDRESS 3813 NORTH NEBRASKA AVENUE  
CITY-ST-ZIP TAMPA, FL 33603

TITLE S ☐ Change ☒ Addition  
NAME Elsa Rodriguez  
STREET ADDRESS P.O. Box 20272  
CITY-ST-ZIP Tampa, FL 33622

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
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: *Ian Davis* 4-26-04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #