

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000110608

Entity Name: PARROT COVE MUSIC, INC.

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

514 N. PALMWAY
LAKE WORTH, FL 33460

New Principal Place of Business:

511 LUCERNE AVENUE
611
LAKE WORTH, FL 33460

Current Mailing Address:

514 N. PALMWAY
LAKE WORTH, FL 33460

New Mailing Address:

511 LUCERNE AVENUE
611
LAKE WORTH, FL 33460

FEI Number: 20-1414055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUBRIN, NORMAN E
514 N. PALMWAY
LAKE WORTH, FL 33460 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KUBRIN, NORMAN E
Address: 514 N. PALMWAY
City-St-Zip: LAKE WORTH, FL 33460

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KUBRIN, NORMAN E P
Address: 511 LUCERNE AVENUE
City-St-Zip: LAKE WORTH, FL 33460

Title: P () Change (X) Addition
Name: KUBRIN, NORMAN E P
Address: 511 LUCERNE AVENUE
City-St-Zip: LAKE WORTH, FL 33460

Title: P () Change (X) Addition
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Address: 511 LUCERNE AVENUE
City-St-Zip: LAKE WORTH, FL 33460

Title: P () Change (X) Addition
Name: KUBRIN, NORMAN E P
Address: 511 LUCERNE AVENUE
City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NORMAN E. KUBRIN

P

04/08/2009

Electronic Signature of Signing Officer or Director

_____ Date