SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Con Francisco Como Como **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 97 JUL 18 PH 2: 10 **DIVISION OF CORPORATIONS** 1997 SECRETARY OF STATE P93000061308 (1) DOCUMENT # TALLAHASSEE CLORIDA RIMSHOT RECORDS, INC. Mailing Address Principal Place of Business 917 OCEANFRONT NORTH P.O. BOX 49092 JACKSONVILLE BOH. FL 32250 JACKSONVILLE BEACH FL 32240 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 09/01/1993 05/01/1996 4. FEI Number Principal Place of Business 28. Mailing Address Applied For Not Applicable 59-3211960 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State **\$5.00** May Be 6. Election Campaign Financing 23 Added to Fees Trust Fund Contribution 28 Country 8. This corporation owes or has paid the current year Intangible Zip Country Yes □ No Personal Property Tax due June 30. 24 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent FITZGERALD, MICHAEL R 917 OCEAN FRONT N. Street Address (P.O. Box Number is Not Acceptable) JACK**SO**NVILLE BCH. FL 32250 83 84 Zip Code City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable **OFFICERS AND DIRECTORS** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 42 12. 13. Addition D □ DELETE rector Change TITLE 1.1 TITLE FITZGERALD, MICHAEL R NAME 1.2 NAME 917 OCEAN FRONT NORTH STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIF 1.4 CITY - ST - ZIF DELETE Change TITLE 2.1 TITLE Dyer, Forrest H NAME 2.2 NAME 844 COVENTRY COURT 2.3 STREET ADDRESS STREET ADDRESS mantua nj CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 THILE GART, HERBERT NAME 3.2 NAME 2492 EASTON ROAD STREET ADDRESS 3.3 STREET ADDRESS **HELLERTON PA** 3.4. CITY - ST- 2IP CITY-ST-ZIP 600002245565 QA -07/23/97--01110--019 \*\*\*\*165.00 \*\*\*\*165.0 TITLE DELETE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS \*\*\*\*165.00 CITY- Z-ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath 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 12 or Block 13 if chapted, or on an attachment with an address.

## RASHOT

7-15-97 Dear Sirs, I recently received a "second notice" to file my Annual Report; however, I did not receive a first notice! I have always filed my reports on time in the past. ( Spoke with Amy Woodward in The Director's Office today and she said it would be OK to re-submit with The original fring fee (\$1650) along with This letter of explanation. Manhs. Mfitz wald,
Pres. FITZGERALB