

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED  
AND  
FILED

95 JUN -9 PM 12: 21

RECEIVED  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995  
FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P43000072965 (5)  
1. Corporation Name DICK HYMAN MUSIC, INC.

Principal Place of Business Mailing Address  
617 MENENDEZ STREET 617 MENENDEZ STREET  
VENICE FL 34285 VENICE FL 34285

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/14/93  
3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address  
21 26

4. FEI Number 22-1751617  
Applied For Not Applicable

Suite, Apt. #, etc. 27

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

City & State 28

6. Election Campaign Financing \$5.00 May Be Added to Fees  
Trust Fund Contribution

Zip 25 Country 29 Zip 30 Country

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RICHARD HYMAN  
617 MENENDEZ STREET  
VENICE, FL 34285

B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City FL B5 Zip Code

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 X 5-15-95  
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT  
NAME RICHARD HYMAN  
STREET ADDRESS 617 MENENDEZ STREET  
CITY-ST-ZIP VENICE, FL 34285

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE SECRETARY  
NAME JULIA HYMAN  
STREET ADDRESS 617 MENENDEZ STREET  
CITY-ST-ZIP VENICE, FL 34285

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS 500001510585  
2.4 CITY-ST-ZIP -06/12/95--01023--013  
\*\*\*225.00 \*\*\*225.00

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 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 the check or check 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Hyman RICHARD E. HYMAN 5-15-95  
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone