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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

Corporation Name

SIGNATURE:

P94000069891 (7)

ALEXANDRIA MUSIC, INC.

Principal Place of Business

Mail-ng Address

2980 MCFARLANE RD. SUITE 211

APPROVED AND FILED

1996 JUN -6 PM 1: 00

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Daytin e Phon∈ #

	GROVE FL 33133	COCONUT GRO	VE FL 33133				
9. Dringing D	N				3. Date Incorporated or Qualified 09/22/1994	3a. Date of L. 04/2	ast Report 8/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 65-0538017		Applied For	
Suite, Apt.	#, etc.	Suite, Apt. #, e	itc.			.	Not Applicable
22		27			5. Certificate of Status Desired		3.75 Additional Fee Required
City & Stat		C/ty & State			Election Campaign Financing Trust Fund Contribution	<u>г</u> \$	5.00 May Be Added to Fees
Zip 24	Country	Zip	Cou	entry	8. This corporation has liability for in		
41	9. Name and Address of Curre	29	[30]	F*** *	Florida Statutes Yes	□ No	
	5. Name and Address of Curre	ent Hegistered Agent		81 Name	10. Name and Address of New Re	egistered Agen	t
CT CO	DDODATION EVETEN			81 Name			
	RPORATION SYSTEM FPINE ISLAND RD			82 Street Add	lress (P.O. Box Number is Not Acceptable	e)	
	ATION FL 33324		ŀ				
FUANTA	MIIVIT FL 33324			83			
			ļ	84 City		 85	Zip Code
11. Pursuant i	to the provisions of Sections 607.050	2 and 607 1509 Florida 5	Statutes Alica d				
or register	red agent, or both, in the State of Flo	rida. Such change was au	narures, the abor thorized by the c	ve-named corpoi orporation's boa	ration submits this statement for the purp and of directors. I hereby accept the appoi	ose of changing	its registered office
	th, and accept the obligations of, Sec	otion 607.0505, Florida Sta	atutes.		том образования в при в в при	Figure 11 to regisi	ereo agent. i am
SIGNATURE	Skyr alline, typed or printed name of registered ages	of and tile if anolicable	INICITE Described	Agent signature require	5 30 mm / 1 3 mm / 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
12.		ND DIRECTORS	13.	Agent signature require		DATE	67.606
ITLE	DPST	DELETE	· · · · · · · · · · · · · · · · · · ·		ADDITIONS/CHANGES TO OFFIC		
				'LE I			
NAME	COURTELIS, PAN					☐ Cha	nge 🔲 Addition
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