FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 18 PM 4:10

DOCUMENT # P94000070881 (5)

1. Corporation Name
ROGUE RECORDS, INC.

Principal Place of Business
1194 OLD DIXIE HWY UNIT 8
LAKE PARK FL 33403

Mailing Address
1194 OLD DIXIE HWY UNIT 8
LAKE PARK FL 33403

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/27/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21	26 P.O. Box 12242
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Lake Park, FL
Zip 24 Country 25	Zip 29 33403 Country 30 USA

4. FEI Number: 65-0521930 ☐ Applied For ☐ Not Applicable

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

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

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

9. Name and Address of Current Registered Agent

DEGAETANO, ALFONSO
1194 OLD DIXIE HWY UNIT 8
LAKE PARK FL 33403

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☒ Change ☐ Addition
NAME	CARNE, SIMON	1.2 NAME	
STREET ADDRESS	900 DEL LAGO CT #202	1.3 STREET ADDRESS	1720 N. Congress Ave #B207
CITY ST ZIP	PALM BEACH GARDENS FL 33401	1.4 CITY ST ZIP	West Palm Beach, FL 33401
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	BELL, BARRON O	2.2 NAME	
STREET ADDRESS	4807 W LOVERS LN	2.3 STREET ADDRESS	
CITY ST ZIP	DALLAS TX 75209	2.4 CITY ST ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	DEGAETANO, ALFONSO	3.2 NAME	
STREET ADDRESS	900 DEL LAGO CT #202	3.3 STREET ADDRESS	
CITY ST ZIP	PALM BEACH GARDENS FL 33401	3.4 CITY ST ZIP	
TITLE	D	4.1 TITLE	☒ Change ☐ Addition
NAME	COTHREN, SAM	4.2 NAME	Stan Cothren
STREET ADDRESS	4807 W LOVERS LN	4.3 STREET ADDRESS	
CITY ST ZIP	DALLAS TX 75209	4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 CITY ST ZIP	

14. I the undersigned, 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alfonso DeGaetano Alfonso DeGaetano 1/11/95 (407) 863-4849
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE

0243879 CP