

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Montfort
Secretary of State
1900 Capitol Mall, Tallahassee, Florida 32304-0001

APPROVED
AND
FILED

95 MAY -1 AM 7:50

DOCUMENT # P94000076825 (6)

1. Corporation Name

INDEPENDENT MUSIC SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business
1236 TAYLOR ST
HOLLYWOOD FL 33019

Mailing Address
1236 TAYLOR ST
HOLLYWOOD FL 33019

3. Date Incorporated or Qualified
10/17/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For
Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23. Zip

24. Country

28. Zip

29. Country

8. This corporation has liability for intangible tax under S. 199.035,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ESTES, JAMES W
1236 TAYLOR ST
HOLLYWOOD FL 33019

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 (0912) 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 (0912), Florida Statutes.

SIGNATURE

(Signature of Registered Agent, if different from the Registered Agent)

(Signature of Registered Agent, if different from the Registered Agent)

(Signature of Registered Agent, if different from the Registered Agent)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	STREET ADDRESS	CITY, ST, ZIP
D ESTES, JAMES W	1236 TAYLOR ST HOLLYWOOD FL 33019	
D ESTES, ROSEMARY	1236 TAYLOR ST HOLLYWOOD FL 33019	
NAME	STREET ADDRESS	CITY, ST, ZIP
NAME	STREET ADDRESS	CITY, ST, ZIP
NAME	STREET ADDRESS	CITY, ST, ZIP
NAME	STREET ADDRESS	CITY, ST, ZIP
NAME	STREET ADDRESS	CITY, ST, ZIP
NAME	STREET ADDRESS	CITY, ST, ZIP

1. NAME	2. NAME	3. NAME	4. NAME	5. NAME	6. NAME	7. NAME	8. NAME	9. NAME	10. NAME
1. NAME	2. NAME	3. NAME	4. NAME	5. NAME	6. NAME	7. NAME	8. NAME	9. NAME	10. NAME
1. STREET ADDRESS	2. STREET ADDRESS	3. STREET ADDRESS	4. STREET ADDRESS	5. STREET ADDRESS	6. STREET ADDRESS	7. STREET ADDRESS	8. STREET ADDRESS	9. STREET ADDRESS	10. STREET ADDRESS
1. CITY, ST, ZIP	2. CITY, ST, ZIP	3. CITY, ST, ZIP	4. CITY, ST, ZIP	5. CITY, ST, ZIP	6. CITY, ST, ZIP	7. CITY, ST, ZIP	8. CITY, ST, ZIP	9. CITY, ST, ZIP	10. 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 199.03(4)(b), Florida Statutes. Further, I certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as a maker under oath. That I am an officer or director of the corporation or the receiver or custodian empowered to receive the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of a change of an officer or director or address.

SIGNATURE:

(Signature and Typed or Printed Name of Signing Officer or Director)

JAMES ESTES
1236 TAYLOR ST.
HOLLYWOOD FL 33019

4/30

305-925-9414