

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

DOCUMENT # **P94000078627 (4)**

1. Corporation Name  
**UNDERGROUND RECORD SOURCE, INC.**

Principal Place of Business  
**926 N. MILLS AVE.  
ORLANDO FL 32803**

Mailing Address  
**926 N. MILLS AVE.  
ORLANDO FL 32803**

FILED  
Aug 14 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**10/26/1994**

4. FEI Number

**59-3286912**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**THALWITZER, KURT E  
MATEER HERBERT & BATES, P.A.  
225 ROBINSON ST.  
ORLANDO FL 32801**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE  
NAME **CLARK, TERRI**  
STREET ADDRESS **14036 MARINE DR.**  
CITY-ST-ZIP **ORLANDO FL 32832**

TITLE **D** ☐ DELETE  
NAME **CLARK, ROBERT M**  
STREET ADDRESS **1807 E. WEBER ST.**  
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

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

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

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

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

**200002618572**  
**-08/18/98--01028--037**  
**\*\*\*165.00**

**PE**  
**8/14**

14. I 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; 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: *Terri Clark* REQUIRED

**7/28/98 (909) 256-2127**

CR2E034 (5/98)

6

July 28, 1998

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

In regards to Document Number P94000078627 (4), please accept the enclosed payment of \$165.00 for the 1998 State of Florida Corporate Filings, along with my sincere apology for not filing by the original date. Please accept my request to have the Late Filing Penalty Waived. I have multiple responsibilities along with trying to deal with the extremely tremendous personal family stress I have been under for the year, that I honestly don't remember receiving the first filing report. I did not want to bore you with all the details and make it seem as though I am giving you several excuses, but I will be happy to provide details if you would like me too.

I am fairly new to the corporate game; I started the business as a sole proprietorship for the first several years. Again, please accept my sincere apology along with my enclosed payment for \$165.00 to pay for the 1998 Corporate Filing Fee. I will try my best to make sure I do not file late again.

Sincerely,



Terri Clark  
President - URS, Inc.