## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham 🛉

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500004301 (4)

**ROCKIN TUNES, INC.** 

Principal Place of Business

Mailing Address

6701 M LANE DAGUA DOIVE

OTEL MI LAVE DAGMA DOM

## **FILED** Jun 11 1997 8:00am Secretary of State



PLANTATION FL 33324				PLANTATION FL 33324-3137										
								3. Date Inco		Qualified	3a. Date	of Last R 5/1996	eport	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number APPLIED FOR 65-055 1381   Applied For Not Applicable					
Suite, Apt. #, etc.				Suite, Apt. #, etc.				APPLI	ED FUH			_1_1_1_0	ot Applicable	
22				27				5. Certificate of Status Desired S8.75 Additional Fee Required						
City & State	e			City & State				6. Election 0		_	<b>-</b>	\$5.00		
<b>23</b> Zip	Country			Zip Cour				Trust Fund Contribution  8 This corporation has lie						
24	25			E.p	30				8. This corporation has liability for intangible tax under s. 1 Florida Statutes ☐ Yes ☐ No					
		nd Address of Curren	29  nt Regio	stered Agent				10. Name and Address of New Registered Agent						
	LER, RONALI					81	Name							
3440 HOLLYWOOD BLVD.						82	Street A	Address (P.O. Box N	umber is No	t Acceptab	ole)			
SUITE 320														
HOL	llywood fl	. 33019				83								
						84	City				FL	85 Zip (	Code	
11. Pursuant office or r agent. I a	to the provision registered agen im familiar with,	ns of Sections 607.050 nt. or both, in the State , and accept the obliga	2 and 6 of Flori ations o	607.1508, Florida Statut ida. Such change was a of, Section 607.0505, Flo	es, the a authorize orida Sta	abovi ed by atutes	e-named o the corp s.	corporation submits oration's board of di	this stateme irectors. I he	nt for the p reby accep	ourpose of control the appoin	nanging it itment as	s registered registered	
SIGNATURE														
12:	Signature, typed or	printed name of registered age OFFICERS AN			13.		ent signature i	required when reinstaling)  ADDITION:	S/CHANGES	TO OFFIC	DATE SERS AND D	IRECTOR	S IN 12	
TITEC	D	OT TOE TO THE	LO CONTROL	DELETE		TITLE			O) OI P II TOLE	710 0,110		Change	Addition	
NAME	PERL, MAR				1.21	NAME								
STREET ADDRESS		KE DASHA DRIVE			1.3	STREET	ADDRESS							
CITY-ST-ZIP		ON FL 33324		<u>.</u>	1.4	CHY-S	61 - ZIP							
TITLE	D	ıor		☐ DELETE	2.1	TITLE						] Change	Addition	
NAME	PERL, JAN				22	NAME								
STREET ADDRESS		NKE DASHA DRIVE ON FL 33324					ADDRESS							
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NAME				[] bessele		NAME					<b>.</b>	T cultulide	Addition	
STREET ADDRESS					1		ADDRESS							
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TITLE				DELETE		TITLE						Change	Addition	
NAME	]				4. 2	NAME	Ì							
STREET ADDRESS					4.3	STREET	ADDRESS							
CITY-ST-ZIP					44	CITY-S	31 - ZIP							
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NAME						NAME								
STREET ADDRESS	 				- 1		ADDRESS							
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STREET ADDRESS							ADDRESS							
CITY-ST-ZIP	Maggiornia					CITY - S								
U111-01-5E	<del></del>				0.4	VIII 3	II CII			<del></del>				

14. I do hereby ceftify 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 9 any attachment with an address.