

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 24, 2007 08:00 AM
Secretary of State

DOCUMENT # P95000045569 1. Entity Name BRONX SOUL MUSIC, INC.					
Principal Place of Business 3099 NW 63RD ST BOCA RATON FL 33496			Mailing Address 3099 NW 63RD ST BOCA RATON FL 33496		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number NO-T APPLICABLE Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DIMUCCI, SUSAN 3099 NW 63RD ST BOCA RATON FL 33496				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-statuting) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY ST ZIP	D DIMUCCI, SUSAN 3099 NW 63RD ST BOCA RATON FL 33496 ☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	U000000601320 01/26/07-80046-006 150.00 ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD DIMUCCI, DION 3099 NW 63RD ST BOCA RATON FL 33496 ☐ Delete		TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>[Signature]</i> Pres. Jan 21 2007			561 997 2514		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		