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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000068968 (3)

26

WEST BOCA MUSIC MART, INC. Principal Place of Business Mailing Address

23048 SANDALFOOT PLAZA DRIVE BOCA RATON FL 33428

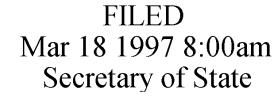
2. Principal Place of Business

Suite, Apt. #, etc.

2a. Mailing Address

Suite, Apt. #, etc.

23048 SANDALFOOT PLAZA DRIVE BOCA RATON FL 33428-6654





3. Date Incorporated or Qualified

09/07/1995

65-0610311

5. Certificate of Status Desired

4. FEI Number

3a. Date of Last Report

561-883-5050

Applied For

\$8.75 Additional

Not Applicable

08/12/1996

22]		27				Lee traduled
City & State)	 	City & State			6. Etection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Z(p)	Country	Zip		Country		This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	- 1 ´		Florida Statutes System In No
	9. Name and Address of Curr	ent Registered A	gent	<u>' </u>	***************************************	10, Name and Address of New Registered Agent
DICKENSON, DAVID B ESQ.					Name	
980 N. FEDERAL HIGHWAY SUITE 410 BOCA RATON FL 33432				82	82 Street Address (P.O. Box Number is Not Acceptable)	
				-		
				83		
				84 City 85 Zip Code		
						FL "
office or re	o the provisions of Soctions 607.0 egistered agenit or both, in the Sta in familiar with, and accept the obl	te of Florida. Such	h change was auth	orized by	the corp	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Stgramm - typed or printed hamic of registered i	igent and late if applicat	ole (NQTE: Fi	egistered Age	int signature i	required when reinstating) DATE
12.		NO DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		☐ DELETE	1.1 TITLE		Change Addition
NAME	CATALANO, ROBERT J			1.2 NAME		
STREET ADDRESS	6475 N.W. 80TH DRIVE			13 STREET	ADDRESS	
CITY - ST - ZIP	PARKLAND FL 33067			1.4 CITY - S	T-ZIP	
TITLE			☐ DELETE	2.1 TITLE		Change Addition
NAME [2.2 NAME	ĺ	
STREET ADDRESS				2.3 STREET	ADDRESS	
CITY ST-ZIF				2. 4 CITY -	ST-ZIP	
THILF			☐ DELETE	31 TITLE	- 1	Change Addition
NAME				3.2 NAME	1	
STREET ADDRESS				3.3 STREET	ADDRESS	
CtTY - S1 - ZtP			DELETE	3.4. CITY -	ST-ZIP	Character Charles
Title			DELETE	4.1 TITLE	1	Change Addition
NAME				4 2 NAME		
STREET ACHIRESS				4.3 STREET	1	
CITY - ST - ZIP			DELETE	4.4 CITY - S 5.1 TITLE	I - ZIP	Change Addition
PILLE NAME			L Miller	5.1 TILLE 5.2 NAME	1	Change Ca Addition
NAME Property unspected				i	ADDDECC	
STREET ADORESS				5.3 STREET		
CITY ST-ZP			DELETE	5.4 CiTY - S 6.1 TITLE	1-2P	Change Addition
NAME				6.2 NAME		
STREET ACORESS			j	6.3 STREET	223BOOA	
GBY-ST ZIP				6.4 CITY-S		
14. I do heret	ny certify that the information supp	led with this filing	does not qualify f	or the exe	mption st	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the
informatio Lam an of annears in	n indicated on this unnual report of flicer or director divide corporation of Block 12 or Block 13 if changed	r supplemental ar or the receiver or or on an attachm	nnual report is true r trustee empowere nent with an addres	and accu ed to exec	rate and cute this re	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the that my signature shall have the same legal effect as if made under oath; that eport as required by Chapter 607, Florida Statutes; and that my name