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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000081778

1. Corporation Name

A-1 MUSIC AND GAMES, INC.

Principal Place of Business Mailing Address						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
1840 HYPOLUXO RD P.O. BOX 220722									
LAKE WORTH I	FL 33462		WEST PALM BCH FL 33422			DO NOT WRITE IN THIS SPACE			
US		US	08		3. Date Incorporated or Qualifed				
-						10/23/1995			
2 Principal D	lace of Business	2a. Mailing Address			·	4. FEI Number		Δη	plied For
	lace of Business	26 464 WEST	أممد	N C	, *	65-0636136		<u></u>	Applicable
Suite, Apt.	# ptc	Suite, Apt. #, etc.	1 6000		<u> </u>	03 0000 100		\$8.75 A	
	#, etc.	27				5. Certifcate of Status Desired		Fee Re	I
City & State	A	City & State		<u> </u>		6. Election Campaign Financing		\$5.00	May Bo
23	- ·	28 W. PALME	BACH	1	G	Trust Fund Contribution		Added to	
Zip	Country	Zip	Cou	ntry	1 6.	8. This corporation owes the curr	ent vear Int	angible	
24	25	29 3341/	30	ú!	2	Personal Property Tax.	•		ZŠNo I
	9. Name and Address of Curre	ent Registered Agent	1 1			10. Name and Address of New I	Registered :	Agent	
				81	Name				
LENNITT, HOWARD				82	Stroot Addre	ess (P.O. Box Number is Not Accepta	able)		
1840 HYPOLUXO RD				32	Suppl Addie	as (F.O. DOX NUMBER IS NOT ACCOUNT	1510)		
LAKE WORTH FL 33462				83					
	•				0			85 Zip C	odo
				84	City		FL	85 Zip C	,000
office or n	egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was pations of, Section 607.0505, F	authorized Iorida Stati	i by t utes.	ne corporation	oration submits this statement for the n's board of directors. I hereby accept	ot the appoir	ntment as reg	gistered
40				Agent	signature required	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	PD				— т	ADDITIONS/CHANGES TO OF	·	Change	
	LENNITT, HOWARD	_							
NAME	1840 HYPOLUXO RD		1.2 NA		*DDDCCC				
STREET ADDRESS	LAVE WOOTH EI			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
CITY-ST-ZIP ·			1.4 CF		-ZIP			☐ Change	Addition
TITLE			2.1 NA			•			_
NAME	-	•			ADDRESS	<i>,</i>			
STREET ADDRESS					ł .				
CITY-ST-ZIP ·	*	☐ DELETE	2.4 CI 3.1 TII		1-ZIP			Change	Addition
TITLE		- OCCLIC	3.2 NA		1				
NAME	•				*000E00				
STREET ADDRÉSS					ADORESS				
CITY-ST-ZIP		☐ DELETE	3.4. CI 4.1 TII		-ZIP			☐ Change	Addition
TITLE									
NAME			4. 2 N		4000000	• .			
STREET ADDRESS					ADDRESS				į
CITY-ST-ZIP			4.4 CF		-ZIP			Change	Addition
TITLÉ			5.1 TF 5.2 NA				•		
NAME	-				ADDRESS				
STREET ADDRESS			5.3 \$1	NCC!	WDD14522				

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 or all integrations with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

☐ DELETE

SIGNATURE:

CITY-ST-ZiP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Addition

Change