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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000085745 (4)

RAWSOUND RECORDS, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			·		
10200 US TOO MIRAMAR FL		10200 US TODAY WAY MIRAMAR FL 33025			DO NOT WRITE IN THIS SPACE
					3. Date incorporated or Qualified 11/06/1995
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address		4, FEI Number Applied For
		26			65-0625532 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required
City & State		City & State	¬ ′		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip			Соц	ntry	This corporation owes or has paid the current year Intangible
24	25	29	30	•	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current				10. Name and Address of New Registered Agent
SPI	TZER, MICHAEL A			81 Name	9
10200 US TODAY WAY			ŀ	82 Street	t Address (P.O. Box Number is Not Acceptable)
MIK	AMAR FL 33025			83	
			-	84 City	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.0508, 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					
				Agent signature	re required when reinstating) DATE ADDITIONS/CHANCES TO DESICES AND DISECTORS IN 12
12.	D OF FIGURE AND	DELETE	13. 1.1 TII	ı F	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	SPITZER, MICHAEL A		1.2 NA		Change results
STREET ADDRESS	TALL OUT ANYLL OTREET			REET ADDRESS	
CITY-ST-ZIP	PEMBROKE PINES FL 33023		i i	Y-ST-ZIP	
TITLE		DELETE	2 1 111		☐ Change ☐ Addition
NAME			2.2 NA		
STREET ADDRESS				REET ADDRESS	
CITY-ST-ZIP				TY-ST-ZIP	
TITLE		DELETE	3 1 T)T		. Change Addition
NAME			3.2 NA	ME	
STREET ADDRESS			3 3 ST	REET ADDRESS	
CITY-ST-ZIP			3 4. CI	IY-SI-ZIP	
TITLE		DELE T E	4 1 TH	LE	☐ Change ☐ Addition
NAME			4. 2 N/	ME	
STREET ADDRESS			4 3 ST	HEET ADDRESS	
CITY-ST-ZIP			4 4 CI	Y-\$1-ZIP	
TITLE		☐ DELETE	5.1 TIT	LE	☐ Change ☐ Addition
NAME			5.2 NA	ME	
STREET ADDRESS			5.3 ST	reet address	
CITY-ST-ZIP			5.4 01	Y-ST-ZIP	
TITLE		☐ DELETE	61 TiT	LE	☐ Change ☐ Addition
NAME			6.2 NA	M₹	
STREET ADDRESS			6.3 ST	REET ADDRESS	
CITY-ST-ZIP			6.4 CII	Y-SI-ZIP	

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 suppliemental 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.

2124 98 SON- 521.8550