SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** P95000086708 (1) PEARL RECORD GROUP, INC. Mailing Address Principal Place of Business 14078 WATER PLANT DRIVE 14078 WATER PLANT DRIVE ORLANDO FL 32837 ORLANDO FL 32837 3a. Date of Last Report 3. Date Incorporated or Qualified 11/13/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 3956 Tour CENTER BLW 21 \$8.75 Additional 5. Certificate of Status Desired Suite, Apt #, etc Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 B. This corporation has liability for intaggible tax under s. 199 032. Country Country Zıp Yes No ORAng Florida Statutes 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PERLA, HENRY L ESQ. Street Address (P.O. Box Number is Not Acceptable) 34 EAST PINE STREET ORLANDO FL 32801 63 Zip Code **B**5 84 City 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, 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, am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. DAIL SIGNATURE (NOTE: Registered Agent's gnature required when reinstating) Signature, typied or printed name of registered agent and tibe if applicable (3/96) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. DELETE 1.1 Title TITLE 1.2 NAME STRICKLER, WILLIAM NAME 13 STREET ADORESS 14078 WATER PLANT DRIVE STREET ADDRESS 1.4 CITY - ST - ZIP ORLANDO FL 32837 CITY-ST-ZIP DELETE 21 TULE TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST- ZIP CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADORESS 3 4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4 1 TiTLE TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CiTY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 City - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6 1 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I turther 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 617, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address
