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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000035831 (2)

HYPE MUSIC, INC.

CITY-\$1-2IP

Principal Place of Business Mailing Address 11502 NNORTH NEBRASKA AVENUE 11502 NNORTH NEBRASKA AVENUE SUITE 103 SUITE 103 **TAMPA FL 33612 TAMPA FL 33612** 3. Date incorporated or Qualified 3a. Date of Last Report 04/23/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution Added to Fees 23 28 Country Ζip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BROWN, CHESTER S 7730 LEWIS ROAD 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33809 63 84 City Zip Code 85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature: typical or pented name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) Change ___ Addition TITLE □ DELETE 1.1 TITLE BROWN, CHESTER S 1.2 NAME NAME 7730 LEWIS ROAD STREET ADDRESS 1.3 STREET ADDRESS **LAKELAND FL 33809** 1.4 CITY-ST-ZIP CHY-ST-7IP DELETE Addition Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ___ Addition TILLE 3.1 TITLE NAM: 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZiP City - \$1 - 7IP ☐ DELETE Change Addition 4.1 TITLE Title NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY ST-ZIE DELETE Addition THE 5.1 TITLE NAME 5.2 NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 City-St-ZIP CITY ST-ZIF □ DELETE Addition ☐ Change 6.1 TITLE THEF 600002182496 -05/19/97--01031--017 NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS**

6.4 CITY - ST-ZIP

14. I do 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 on an attachment with an address.

***165.00