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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 07 1997 8:00am Secretary of State

DOCUMENT	# P90	60000	38897	(0)

1. Corporation Name M. J. & B. J. RECORDS, INC. Principal Place of Business Mailing Address 4002 GANDY BLVD 4002 GANDY BLVD **TAMPA FL 33611** TAMPA FL 33611-3410 3. Date Incorporated or Qualified 3a. Date of Last Report 05/06/1996 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 3376164 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζιρ Country Ζıp Country 8. This corporation has liability for intangible tax under s. 199.032, Yes 🗌 No 25 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** ROUSSELLE, PAULA 800 W DELEON ST 62 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33606** 83 Zip Code 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. DELETE Change Addition 1.1 TITLE THLE SCHNITT, TODD A 1.2 NAME CR2E034 NAME 4002 GANDY BLVD 1.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33611** 1.4 CITY-S1-ZIP CHTY-S1-ZIF Change Addition DELETE 2.1 TITLE THILE HARRIS, BARRY J 2.2 NAME NAME 4002 GANDY BLVD 2.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33611** 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 3.1 VITLE 3 2 NAME NAME **33 STREET ADDRESS** STREET ADDRESS 34. City-St-ZIP CITY - 51 - ZIP Addition DELETE Change 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4.4 CITY-ST-ZIP City - \$1 - ZIP Change Addition DELETE 5.1 TITLE 5.2 NAME

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 around 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 dorporation 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CONV. ST. ZIP

CITY - ST - ZIP

DELETE

TODO ALL SCHNITT

Change Addition

(96/6)