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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

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Mar 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000047375 (6)

C & B MUSIC GROUP, INC.

appears in Block 12 or Block

SIGNATURE:

Principal Piace of Business Mailing Address 185 NW 14TH WAY P O BOX 846 DAMA FL 33004 DANIA FL 33004-0846 3. Date Incorporated or Qualified 3a. Date of Last Report 05/31/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Z_{Ψ} Country Country 8. This corporation has liability for intangible tax under s. 199.032 24 25 29 Florida Statutes Yes No 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BUTLER, CARL B 195 NW 14TH WAY 82 Street Address (P.O. Box Number is Not Acceptable) **DANIA FL 33004** 83 City Zip Code 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligators of Schon 607,0505, Florida Statutes. CARL NOTE: Registered Agent signature required v ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) Addition DELETE Change $\Pi\Pi H$ 1.1 THLE MEIBA V. Burler NAME 1.2 NAME CR2E034 195 N.W IYTHWAY S18ELLAFORESS 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP DIT ST / P DELETE Change Addition 2.1 TITLE TIME NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST- 7IP CITY - ST. ZIP DELETE Change ___ Addition 100 3.1 TITLE 3.2 NAME N/M 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP C(19 + S' + 70)DELETE Addition Change 1016 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET AFORESS CHY SEZE 44 CITY-ST-ZIP 🔲 DELETE Change Addition THILE 5 1 TITLE 5.2 NAME TEAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP DELETE Change Addition 61 TITLE 11116 NW 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP City - \$1-7P 14. If 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 endocated 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 are an ellipser or director of this corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

CARL B BUTTER