2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P9600052840

RUFF KREW MUSIC COMPANY, INC.

FILED Apr 16, 2001 8:00 am Secretary of State 04-16-2001 90033 045 ***150.00

MIAMI FL 33173			Mailing Address 7103 SW 102 AVE STE A MIAMI FL 33173 US			B 0036656				
2. Principal P	Place of Busin	ess	3. Mailing Address							
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State			City & State	City & State		_4FEI Number	65-0681379	. 	<u> </u>	pplied For
Zip	Country		Zip Country			5. Certificate of Status Desired S8.75 Address Require			ditional	
	6. Name	and Address of Current F	legistered Agent			7. Name and A	ddress of New Reg	istered Ag	jent	
7103	IS, DEBORA ISW 102 A IN FL 33173	VE STE A	Name Street			Address (P.O. Box Number is Not Acceptable)				
		•		City	· · · · · · · · · · · · · · · · · · ·			FL	Zip Coo	de
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.										
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
Tax filing r	_	ble to satisfy its Intangible and elects to do so.	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of Sta			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
11.		OFFICERS AND D		12.		ADDITIONS/CH	IANGES TO OFFICE	RS AND D	DIRECTOR	S IN 11
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NAME Street Address City-St-Zip	1 -	102 AVE STE A		NAME STREET ADDR						
TITLE	VSD		Delete	TITLE				г	Change	☐ Addition
NAME		, DONOVAN	- Délete	NAME						
STREET ADDRESS CITY-ST-ZIP	7103 SW. MIAMI FL	102_AVE.STE.A		STREET ADDR City-St-Zip						
TITLE	PTD		Delete	TITLE					Change	Addition
NAME	STAFF, NI			NAME						
STREET ADDRESS CITY-ST-ZIP	7103 SW MAMI FL	102 AVE STE A		STREET ADDR						1
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STREET ADDRESS				STREET ADDR	IESS MILE	mi Fl	331-73	•		ļ
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NAME			□ Delete	NAME	-			L	Unanye	☐ MOGRESS
STREET ADDRESS				STREET ADDR	ESS					}
CITY-ST-ZIP				CITY-ST-ZIP						
 I hereby condition indicated 	ertify that the on this repor	information supplied with the consumption in the information supplies that it is to the consumption in the information in the consumption in the information in the information in the consumption in the information in the i	his filing does not qualify for rue and accurate and that m	the exemption	stated in Sec	ction 119.07(3)(i), fame legal effect as	Florida Statutes. I fur s if made under oath	rther certify	that the i	nformation 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.