Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90052 040 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000061635**

1. Corporation Name

D.D.C. MUSIC ENTERTAINMENT GROUP, INC. Principal Place of Business Mailing Address 1634 MAIN STREET P.O. BOX 3319 SARASOTA FL 34236 US					DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified			
2. Principal P	ace of Business	2a. Mailing Address			07/23/1996 4. FEI Number	Apr	plied For	
21 26					65-0693916	Not	t Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A Fee Re		
	City & State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	• ,	
Zip				ıry	8. This corporation owes the current year Intangible Personal Property Tax.			
24	25		<u>ol</u> —		10. Name and Address of New Registered A			
-	9. Name and Address of Curr	ent Registered Agent		1 Name	10. Maille allu Address of New Registered P	196711		
GEORGE V. FAMIGLIO JR 1634 MAIN ST. SARASOTA FL 34236					ress (P.O. Box Number is Not Acceptable)			
'				34 City	FL	85 Zip C	1	
11. Pursuant office or ragent. I a			_	ove-named corporation the corporation of the corpor	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint of when reinstating)	changing its itment as rec	registered gistered	
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	PQ/	DELETE	1.1 TITLE		•	☐ Change	☐ Addition	
NAME	GOLLINS, DARTHY DEAN		1.2 NAM	E				
STREET ADDRESS	1634 MAIN STREET		1.3 STRI	EET ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34236		14 CITY	'-ST-ZIP			}	
TITLE			2.1 TITL			Change	Addition	
NAME			2.2 NAM			•	J	
				EET ADDRESS				
STREET ADDRESS							ľ	
CITY-ST-ZIP			3.1 TITL	Y-ST-ZIP		Change	☐ Addition	
TITLE				•		_ ,	_	
NAME			3.2 NAW	ĺ			Í	
STREET ADDRESS			3.3 STREET ADDRESS					
CITY-ST-ZIP			_	Y-ST-ZIP		Change	Addition	
TITLE		☐ DELETE	4.1 TITL			C cuande		
NAME			4 2 NA					
STREET ADDRESS			4.3 STR	EET ADDRESS				
CITY-ST-ZIP			4.4 CITY	'-ST-ZIP				
TITLE		DELETE	5.1 T?TL	E		Change	☐ Addition	
NAME			5.2 NAM	IE				
STREET ADDRESS			5.3 STR	EET ADORESS				

14. I 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 suppliemental 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 changes, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

Change

Addition