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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

andra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000066618 (5)

MEGA DJ TAPES, INC.

Principal Place of Business

Mailing Address

FILED Jun 20 1997 8:00am Secretary of State



54 SAMUEL STREET ORLANDO FL 32810		54 SAMUEL STREET ORLANDO FL 32810-8256			
				3. Date Incorporated or Qualified 08/07/1996	3a. Date of Last Report
	Place of Business	2a. Mailing Address	5	4. FEI Number	Applied For
	Samuel 5	26 54 5ar	yvel "	•	Not Applicable
Suite, Apt.	• • •	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	indo *lorida	28 05 4nd 0		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
zip 24 3 28	SO 25 OF ANG E.	29 32810	30 Orange		Yes 🗹 No
CHE	RINTON, CHARLES	it Hegistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
	SAMUEL STREET				
ORLANDO FL 32810			82 Street Ad	dress (P.O. Box Number is Not Acceptab	lo)
			63		•
, pile	•		84 City		FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions of Soctions 607.050 registered apent, or both, in the State am familiar Aith, and accept the obliga	2 and 607.1508, Florida Statu of Florida. Such change was ations of, Section 607.0505, Ft	tes, the above-named co authorized by the corpor orida Statutes.	orporation submits this statement for the p ation's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered
SIGNATURE	Signature, lyped or printed name of registered age	unt	L: Registored Agent signature reg	,	1001 25 1997
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	CURINTON, CHARLES		1.2 NAM€		
STREET ADDRESS	54 SAMUEL STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32810		1.4 CITY - ST - 7IP		
TITLE		☐ DELETÉ	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	2.4 CHY-SJ-ZIP		Change Addition
TITLE '		ocicie	3.1 TITLE		L Change Apperon
STREET ADDRESS			3.2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS		
TITLE		DELFTE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME		(<u> </u>	4. 2 NAME		Onday Nation()
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City-St-7IP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		DS
STREET ADDRESS			5.3 STREET ADDRESS		1,5
CITY-ST-ZIP			5.4 CITY - ST - ZIP		6.20
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME	00000221 -06/23/970103	9430
STREET ADDRESS			6.3 STREET ADDRESS	-06/23/<u>97</u> 0103	31021
CITY-ST-ZIP			6.4 CITY - ST - ZIP	***1 73. 75	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.