05-04-1999 90114 007 ***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 # P9700034559

1. Corporation Name

PARK PLACE RECORDS, CORP.

174111112	ACE HECCHEC, COM.				
Principal Place	of Business	Mailing Address			# 1881/1881 118 1871/ 1881/ 881/1 881/1 881/1 881/1 881/1 881/1 881/1 881/1 87/1
2717 W CYPRESS CREEK RD 2717 W CYPRESS CREEK RD)		
SUITE 802 SUITE 802					DO NOT WRITE IN THIS SPACE
FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309					3. Date Incorporated or Qualifed
US	•	US			04/16/1997
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
——————————————————————————————————————			•		95-0748428 < 65-0748428 Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional
22	,	27			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	· .	8. This corporation owes the current year Intangible
24	. 25	29 3	0		Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
0.11	TOD CAMUEL I	•	81	Name	
	TOR, SAMUEL J		82	Street A	Address (P.O. Box Number is Not Acceptable)
	W. PALMETTO PARK ROAD			<u> </u>	
	E 485		83		
ВОС	A RATON FL 33486		84	City	85 Zip Code
				L	FL 33 25 GGG
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					quired when reinstating) DATE
12.	Signature, typed or printed name of registered agent		13.	nt signature re	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D OFFICERS AND	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PARKER, DAVID L		1.2 NAME		
STREET ADDRESS	2717 W CYPRESS CREED RD			T ADDRESS	
CITY-ST-ZiP	FT LAUDERDALE FL 33309		1.4 CITY-S		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	PARKER, DEBRA		2.2 NAME	}	
STREET ADDRESS	2717 W CYPRESS CREEK RD		2.3 STREE	TADORESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309		2. 4 CITY-	1	
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME	-	
STREET ADDRESS			3 3 STREE	TADDRESS	
CITY-ST-ZIP			3.4. CITY-5	ST-ZIP	
) TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREE	T ADDRESS	
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME .			5.2 NAME		
STREET ADDRESS			5.3 STREE	T ADDRESS	• .
CITY-ST-ZIP			5.4 CITY-5	T-ZIP	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	Į	•
STREET ADDRESS			6.3 STREE	T ADDRESS	

CITY-ST-ZIP 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 changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

877-969-0658