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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000042965 (8)

LIL' BRO RECORDS, INC.

Principal Place of Business

Mailing Address

FILED May 06 1998 8:00am Secretary of State



512 SW 1ST STREET 512 SW 1ST STREET BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualified 05/12/1997	1	
2. Principal Place of Business 26. Mailing Address 26. 544 NW 10 AVE				4. FEI Number 65-0808	7 /// hater	plied For t Applicable
Suite, Apt.		Suite, Apt #, etc.		5. Certificate of Status Desired	□ \$8.75 A Fee Rec	
City & State 23 BOYA	HON Florida	City & State 28 Boynton B	beach, Fi	6. Election Campaign Financing Trust Fund Contribution	\$5.00 i	
24 33 4	35 25 Palm Beach	$\sqrt{\frac{29}{33}}$	Country PAIM B	8. This corporation owes or has Personal Property Tax due Ju	ne 30. 🔲 Yes 🗜	ngiblo No
RIT	 Name and Address of Current TLER, WILLIS J 	. Hegistered Agent	81 Name	10. Name and Address of New F	tegistered Agent	
. 512	SW 1ST STREET YNTON BEACH FL 33435		82 Street 5 A	Address (P.O. Box Number is Not Accept	able)	
İ			84 City (BOUNTON BOOK	FL 85 Zip C	Gode 43.5
office or re	ealstered agent, or both, in the State (of Honda, Such change was au	thorized by the cor	corporation submits this statement for the poration's board of directors. I hereby acc	numose of changing its	registered
agent. La	n familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statutes.	4/20/	98	
12,	Signature, typed or printed name of region as Laure OFT ICERS AND		Rng-stered Agent signature	and a reported when reinstating) ADDITIONS/CHANGES TO OFF	DATE	S IN 12
TITLE	DP	DELETE	1.1 101LE	1\D	L Change	Addition
NAME	BUTLER, WILLIS J		1.2 NAME	Buller, Willis 7		
STREET ADDRESS	512 SW 1ST STREET		1.3 STREET ADDRESS	544 NW 10 AVE		
CITY-ST-ZIP	BOYNTON BEACH FL 33435	DELETE	1.4 CITY - ST - ZIP	Boynton Beach, Fl 334	Change	Addition
TITLE NAME		C MIEIE	21 TITLE 22 NAME	}	Change ()	L_J AGGIROI
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY - ST- ZIP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			_
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	41TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME	,		
STREET ADDRESS			5.3 STREET ADDRESS			
CFTY-ST-ZIP			5.4 CITY-SI - ZIP			<u> </u>
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS	,		
'ITY-ST-ZIP			6 4 CITY - S1 - ZIP	100000000000000000000000000000000000000		
indicated officer or o	on this annual report or supplemental	annual report is true and accur iver or trustee empowered to ex	rate and that my sig	ed in Section 119.07(3)(I), Florida Statutes gnature shall have the same legal effect as a required by Chapter 607, Florida Statutes	if made under oath; that	t I am an