

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000046265

1. Entity Name
PERRY MUSIC CO., INCORPORATION

Principal Place of Business

1733 SW BILTMORE
PORT ST LUCIE FL 34984
US

Mailing Address

1733 SW BILTMORE
PORT ST LUCIE FL 34984
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0761479**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PATEL, YOGESH
5766 TURNWOOD COURT
JUPITER FL 33458

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 *(YOGESH PATEL)*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back). ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VP** ☒ Delete
NAME **RAJESH PATEL**
STREET ADDRESS **49848 COOKE AVE**
CITY-ST-ZIP **PLYMOUTH MI 48170**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **MAHESH PATEL**
STREET ADDRESS **8111 MAGIC WAY,**
CITY-ST-ZIP **JUPITER, FL - 33458**

TITLE **P** ☐ Delete
NAME **NAYAN PATEL**
STREET ADDRESS **35 BUXTON LN**
CITY-ST-ZIP **BOYNTON BEACH FL 33462**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **PATEL, BAKUL**
STREET ADDRESS **373 MEJESTIC**
CITY-ST-ZIP **PORT SAINT LUCIE FL 34984**

TITLE **DIRECTOR SECRETARY** ☐ Change ☒ Addition
NAME **MUKESH PATEL**
STREET ADDRESS **608 MEADOWS CIRCLE,**
CITY-ST-ZIP **BOYNTON BEACH, FL - 33436**

TITLE **SB VP** ☐ Delete
NAME **PATEL, YOGESH**
STREET ADDRESS **5766 TURNWOOD COURT**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE **VICE PRESIDENT** ☒ Change ☐ Addition
NAME **PATEL YOGESH**
STREET ADDRESS **5766 TURNWOOD COURT**
CITY-ST-ZIP **JUPITER, FL - 33458**

TITLE **T** ☐ Delete
NAME **PATEL, ANKUR**
STREET ADDRESS **19578 TRAILS END TERRACE**
CITY-ST-ZIP **JUPITER FL 33458**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *(NAYAN PATEL)*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 01, 2001 8:00 am
Secretary of State

05-01-2001 90079 012 ***150.00

642834



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)