

ND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
OUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 10, 1999 8:00 am
Secretary of State

09-10-1999 90009 019 ***150.00

DOCUMENT # **P97000055537**

orporation Name
PLINE RECORDS INC.

614220 - 90009 - 19



Principal Place of Business Mailing Address
154TH STREET **892 NE 154TH ST.**
MIAMI BEACH FL 33162 **NORTH MIAMI BEACH FL 33162**
US

DO NOT WRITE IN THIS SPACE

Principal Place of Business 2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Country 29 Zip 30 Country

3. Date Incorporated or Qualified
06/23/1997
4. FEI Number **65-0770117** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required
6. Election Campaign Financing ☐ **\$5.00** May Be
Trust Fund Contribution Added to Fees
8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TATE, EUNICE
892 NE 154TH ST.
N. MIAMI FL 33162

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE **8/20/99**

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDRESS **PSTD** ☐ DELETE
EDWARDS, JERMAINE
ZIP **892 NE 154TH ST.**
N. MIAMI FL 33162

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

ADDRESS **T** ☐ DELETE
EDWARDS, SOPHIA
ZIP **1850 NE 142ND STREET #7H**
NORTH MIAMI BEACH FL 33181

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

ADDRESS ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

ADDRESS ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

ADDRESS ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

ADDRESS ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 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 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 Block 12 or Block 13 if changed, or on an attachment with an address.

NATURE: *Jermaine Edwards* SIGNATURE REQUIRED

8/20/99

Daytime Phone #

CR2E034 (5/99)

P97 000055537
614220-90009-19

Dear Department of State

Hello my name is Jermaine Edwards from TopLine Records Inc.

I just only recieved this letter saying it was our second notice about a week ago. I, or nobody else never recieved a letter in January letting us know it was time to reinstate the corporation

Thank You

Jermaine Edwards

(phone) (305) 919-7747