

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000081431

1. Entity Name

UPPER ROOM RECORDING, INC.

Principal Place of Business

Mailing Address

2200 NORTH FEDERAL HIGHWAY #221
BOCA RATON FL 33431

2200 NORTH FEDERAL HIGHWAY #221
BOCA RATON FL 33431

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 65-0798272

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

BACZEWSKI, DAWN
401 NE MIZNER BLVD
#T-706
BOCA RATON FL 33432

Name

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

455 NE 2nd Street

City

Boca Raton

FL

Zip Code

33432

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

Signature: Typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/23/01

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 NAME D BACZEWSKI, CHRIS ☐ Delete
STREET ADDRESS 401 NE MIZNER BLVD # T-706
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME D BACZEWSKI, DAWN ☐ Delete
STREET ADDRESS 401 NE MIZNER BLVD #T-706
CITY-ST-ZIP BOCA RATON FL 33432

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS 455 NE 2nd Street
CITY-ST-ZIP Boca Raton, FL 33432

TITLE NAME ☒ Change ☐ Addition
STREET ADDRESS 455 NE 2nd Street
CITY-ST-ZIP Boca Raton, FL 33432

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

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

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

TITLE NAME ☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/23/01

561-392-8111

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90043 009 ***158.75

ATTENTION



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)