## 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 # P97000085746 (0)

HOLLYWOOD EAST MUSIC GROUP, INC.

## FILED May 18 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				- L COSTERNATI WITH FOURT CODES AND CONTROL OF CONTROL	ISLAN DETLE LAMIS OF LIN DIEL LARE	
THIS WE TALL AVE						
HOLLYWOOD PL 33020						
334 Wadson Street			$\sim$	DO NOT WRITE IN THIS	S SPACE	
10111112001 FC 35019			19	3. Date Incorporated or Qualified		
2. Principal Place of Business 2a. Mailing Address			<u> </u>	09/30/1997		
AS ABOVE TO AS ABO			onve	4. FEI Number 0 9 / 1/ 1	Applied For	
Suite, Apt. #, etc. Suite, Apt. #, etc.				03.0114119	\$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	Zug	Country	B. This corporation owes or has paid the c	urrent year Intangible	
24	25	29 30	ol	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	d Agent	
BERCUSON, DAVID						
9130 \$ DADELAND BLVD			82 Street Addi	82 Street Address (P.O. Box Number is Not Acceptable)		
TWO DATRAN CENTER, STE #1704				16-94-		
MIAMI FL 33156			B3	83		
			84 City	84 City 85 Zip Code		
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  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.5 TITLE	resident	Change Addition	
NAME	Hartigan, Chrystal 🔔 👡	الموسئلة حمدا	12 NAME	hrystal HARTIGI	AN S	
STREET ADDRESS	1115 N 14TH AVE 7 33	4 madising ]	1.3 STREET ADDRESS	34 madison St	ا ا	
CITY-ST-ZIP	HOLLYWOOD FL 33020 4	DILY WOOD, FL-	3404(SF)1P	HOILYWOOD, FL 33/	219	
TITLE	1001100	DELLTE	2.1 TITLE	( )	Change Addition	
NAME	LOGUIDICE, MICHAEL		2.2 NAME			
STREET ADDRESS	1115 N. HTH AVE HOLLYWOOD FL 33020		2.3 STREET ADDRESS			
CITY-ST-2IP	1102111000 FE 33020	00.07	2.4 CITY - ST - ZIP			
TITLE		☐ DELETE	3.1 TIFLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADORESS			3 3 STREET ADDRESS			
CFTY - ST - ZIP TITLE		☐ DELETE	34. CITY-ST-ZIP 41 TITLE		Change Addition	
NAME			4. 2 NAME		Change Addition	
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			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 N/.ME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			64 CITY-ST-ZIP			
14. I hereby c	ertify that the information supplied with	this filing does not qualify for th		Section 119.07(3)(i), Florida Statutes. I further of	ertify that the information	

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 informatio 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 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 changing, or on an attachment with an address

Chrystal Hartigan

SIGNATURE

HATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTO

27 98 305-944-345 Daysone Proce # 0131281