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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90248 020 ***150.00

DOCUMENT # P97000085746

1. Corporation Name

HOLLYWOOD EAST MUSIC GROUP, INC.

-334 MADISON ST 309 Crocus Terr	Cace Manicon Cross	errace
HOLLYWOOD FL 33019 #1	#1	
US	US	DO NOT WRITE IN THIS SPACE
		3. Date Incorporated or Qualifed
		09/30/1997
2. Principal Place of Business	2a. Mailing Address	4. FEI Number Applied For
<u> </u>		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	\$8.75 Ac ditional
	H ' '	5. Certificate of Status Desired Fee Required
City & Slate	City & State	6. Election Campaign Financing S5.00 May Be
Hollywood, FL 33019	Hollywood, FL 3301	6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	Zip Country	This corporation owes the current year Intangible
	29 30 USA	Personal Property Tax.
9, Name and Address of Current		10. Name and Address of New Registere 1 Agent
5. Name and Add 653 of Carrent	81 Name	
BERCUSON, DAVID		
9130 S DADELAND BLVD	82 Stree	et Address (P.O. Box Number is Not Acceptable)
TWO DATRAN CENTER, STE #1704	83	
MIAMI FL 33156	63	
	84 City	85 Zip Code
		FL W 25 State
11. Pursuant to the provisions of Sections 607.0502	and 607.1508, Florida Statules, the above-name	d co-poration submits this statement for the purpose of changing its registered poration's board of cirectors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligation	ons of, Section 607.0505, Florida Statutes.	11,399
SIGNATURE / STUTE	arligas	<u> </u>
Signature, typed or printed name of registered agent		
12. OFFICERS AND		ADDITIC NS/CHANGES TO OFFICERS / ND DIRECTOR S IN 12
TITLE P	☐ DELETE 1.1 TITLE	Change D Addition
NAME HARTIGAN, CHRYSTAL	1.2 NAME	000 0 5 5
STREET ADDRE 3S -394 MADISON ST	1.3 STREET ADDRES	
CITY-ST-ZIP HOLLYWOOD FL 33019	1.4 CITY-ST-ZIP	Hollywood, FL 33019
TITLE	☐ DELETE 2.1 TITLE	☐ Change ☐ Addition
NAME	2.2 NAME	
STREET ADDRESS	2.3 STREET ADDRES	s s
CITY-ST-ZIP	2. 4 CITY-ST-ZIP	
TITLE	DELETE 3.1 TITLE	☐ Change ☐ Addition
NAME	3.2 NAME	
STREET ADDRESS	3.3 STREET ADDRES	ss
CITY-ST-ZIP	3.4. CITY-ST-ZIP	
TITLE	☐ DELETE 4.1 TITLE	☐ Change ☐ Addition
NAME	4, 2 NAME	
STREET ADDRE 3S	4.3 STREET ADDRES	ss
	4.4 CITY-ST-ZIP	
CITY-ST-ZIP	DELETE 5.1 TITLE	Change Addition
NAME	5 2 NAME	
STREET ADDRESS	5 3 STREET ADDRES	ss
	5.4 CITY-ST-ZIP	
CITY-ST-ZIP	DELETE 6.1 TITLE	☐ Change ☐ Addition
TITLE	62 NAME	
NAME		
STREET ADDRE 3S	6.3 STREET ADDRES	NO
CITY-ST-ZIP	64 CITY-ST-ZIP	

14. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE & OR DIRECTOR

954-919-098) Daytime Phone # CR2E034 (11/98)