

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90239 036 ***158.75

DOCUMENT # P98000044860
1. Entity Name
HEAVY HITTERS RECORDING, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1979 NE. 147 LANE
Suite, Apt. #, etc.

3. Mailing Address
1979 N.E. 147 Lane
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL
Zip
33181-1140 Country
USA

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Miami, FL
Zip
33181-1140 Country
USA

4. FEI Number
65-0836846 Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Reginald E. Lee
Street Address (P.O. Box Number is Not Acceptable)
765 N.W. 130 St
City
Miami FL Zip Code
33168

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 Reginald E. Lee DATE 4/22/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>PTC</u> <u>Reginald E. Lee</u> <u>765 N.W. 130 St</u> <u>Miami, FL 33168</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>VP/D</u> <u>Carl Smith Jr.</u> <u>4030 N.W. 192 St</u> <u>Miami FL 33055</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>T/S</u> <u>Duane Thomas</u> <u>935 S.W. 130 Ave</u> <u>Perimeter Pines, FL 33025</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Reginald E. Lee DATE 4/22/02 (305) 331 5623
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034B (12/01)