

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 28, 2002 8:00 am**  
**Secretary of State**

05-28-2002 91504 004 \*\*\*158.75

**DOCUMENT # P98000071682**

**1. Entity Name**  
**BIG HOUSE MUSIC INC.**

**Principal Place of Business**

**2969 JOHN YOUNG PKWY STE 110  
 ORLANDO FL 32804**

**Mailing Address**

**P.O. BOX 060157  
 1  
 PALM BAY FL 32906**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**

**City & State**

**4. FEI Number**

**59-3531905**

**Applied For**

**Not Applicable**

**Zip**

**Country**

**Zip**

**Country**

**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**

**BROWN, TONEYE**

**2969 JOHN YOUNG PKWY STE 110  
 ORLANDO FL 32804**

**Name**

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

**City**

**FL**

**Zip Code**

**32901**

**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**

**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, 2002 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**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b>	<b>P</b> <input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>BROWN, TONEYE</b>	<b>NAME</b>	
<b>STREET ADDRESS</b>	<b>2969 JOHN YOUNG PKWY STE 110</b>	<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	<b>ORLANDO FL 32804</b>	<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<b>VP</b> <input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>HEKACH, JAN</b>	<b>NAME</b>	
<b>STREET ADDRESS</b>	<b>2969 JOHN YOUNG PKWY STE 110</b>	<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	<b>ORLANDO FL 32804</b>	<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<b>S</b> <input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>ANTHONY, J</b>	<b>NAME</b>	
<b>STREET ADDRESS</b>	<b>2969 JOHN YOUNG PKWY STE 110</b>	<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	<b>ORLANDO FL 32804</b>	<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		<b>NAME</b>	
<b>STREET ADDRESS</b>		<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>		<b>CITY-ST-ZIP</b>	

**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:**

*Toneye Brown* **Toneye Brown** **4-15-02** **948-8872**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment

#P986000716

7/10/47 82

Please except our payment  
of \$750.<sup>00</sup> We understand

~~we are late however, our financial~~

State is in such dissaray,  
we hope we can get an exception  
because of our current situation.

If you would like more info  
regarding this we would happily  
provide. We are extremely grateful  
for any assistance you can  
provide us. Thank You.

Jimmy Joney & Brown  
Big House Music

(407) 948-8872