## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # **P98000088243** Jan 28, 2000 8:00 am **Secretary of State** GREAT MUSIC PERFORMANCE, INC. 01-28-2000 90211 034 \*\*\*150.00 Mailing Address Principal Place of Business 1750 NW 38TH AVE. 1750 NW 38TH AVE. LAUDERHILL FL 33311-4117 LAUDERHILL FL 33311 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 65-0869240 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Namê JOHNSON, RICHARD Street Address (P.O. Box Number is Not Acceptable) 1750 NW 38TH AVE. LAUDERHILL FL 33311 Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change ☐ Addition DP TITLE TITLE ☐ Delete JOHNSON, RICHARD NAME NAMÉ STREET ADDRESS 1750 NW 38TH AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33311 Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of 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 impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if 13. I hereby certify that the informatio indicated on this report or supple of the corporation or the received changed, or on an attach with all other like empowered. SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR