## 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

## DOCUMENT # P98000099672

MUSIC ASSOCIATES, INC.

Principal Place of Business

Mailing Address

## **FILED** Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90002 019 \*\*\*150.00



9630 N.W. 17TH STREET PLANTATION FL 33322	9630 N.W. 17TH STREET PLANTATION FL 33322		DO NOT WRITE IN TH	IS SPACE
			3. Date Incorporated or Qualifed 11/30/1998	
2. Principal Place of Business	2a. Mailing Address	0 . 94	4. FEI Number 0878165	- Applied For
21 8360 STOIL YUAD 8	4 26 8360 JAK	ROAD 84	65-08/0100	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	. <u> </u>	5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State 23 FT, LAVO GROALE FL	City & State 28 FT, LAUDEROS	KE FL.	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 24 33324 25 BROWAR		BROWARL	8. This corporation owes the current year Personal Property Tax.      Name and Address of New Registere	Yes □No
9. Name and Address of Curr	ent Registered Agent	81 Name		1
FILINGS, INC.	•	INSIDE C	-OHER CORPURATE	164NIS IN
3732 N.W. 16TH STREET			ess (P.O. Box Number is Not Acceptable)	10:00
FT. LAUDERDALE FL 33311-4132			101 S. BAYSHORK	UNIVE
FI. LAUDENDALE PL 33311-4132		83	19011 FLOOR	
		84 City	DIAMS F	
11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Star	502 and 607.1508, Florida Statutes, the of Florida, Such change was author pations of Section 607.0505, Florida	he above-named corp rized by the corporation Statutes.	on a board of directors. Thereby accept the app	John Line III as registeres
SIGNATURE TO A STATE OF THE SIGNATURE	AND BUT 1/UD	stered Agent signature require	d when reinstating) DATE	
12. OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE D	☐ DELETE	1.1 TITLE   <b>(</b>	1/6	Change 🗌 Add
NAME NORKIN, GARY		1.2 NAME	ORKIN, GART	
STREET ADDRESS 9630 N.W. 17TH STREET			360 STATE RUAD 84	
CITY-ST-ZIP PLANTATION FL 33322		1.4 CITY-ST-ZIP	TLANDEROBLE FL 3	3324
TITLE	☐ DELETE	2.1 TITLE <b>D</b>	0/5	Change Add
NAME	Í	2.2 NAME	TABILE BETH	
STREET ADDRESS		2.3 STREET ADDRESS	TABILE BETH 360 STATE ROAD 84	
CITY-ST-ZIP	and the same of the same of the	2.4 CITY-ST-ZIP	I UNITE I I I	1324
TITLE	☐ DELETE	3.1 TITLE	IV CTALLE	☐ Change
NAME		3.2 NAME	MELLMAN; JIEUEN	
STREET ADDRESS		3.3 STREET ADDRESS	NELLMAN, STAVEN 1360 STOTE ROAD 84	<i>!</i>
CITY-ST-ZIP	j	3.4. CITY-ST-ZIP	TLAUDERDALE TL	3332 Y
TITLE .	☐ DELETE	4.1 TITLE		☐ Change ☐ Add
NAME		4. 2 NAME		
STREET ADDRESS	1	4.3 STREET ADDRESS		
	]	4.4 CITY-ST-ZIP		
CITY-ST-ZIP	☐ DELETE	5.1 TITLE		☐ Change ☐ Add
NAME		5.2 NAME		
İ	l l	5.3 STREET ADDRESS		
STREET ADDRESS		5.4 CITY+ST-ZIP		
City-St-ZiP	☐ DELETE	6.1 TITLE		Change Add
TITLE		6.2 NAME		
NAME	į,	6.3 STREET ADDRESS		
STREET ADDRESS	J	6.4 CITY-ST-ZIP	·	
CITY-ST-ZIP		0.4 CH 1-31-4P		

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.