## 2000 UNIFORM BUSINESS REPORT (UBR) 4/. DOCUMENT # P9900002110 Aug 02, 2000 8:00 am Secretary of State CHASE MUSIC ASSOCIATES, INC. 04-22-2000 90002 048 \*\*\*150.00 Principal Place of Business Mailing Address 2475 HOLLYWOOD BLVD. 2475 HOLLYWOOD BLVD. HOLLYWOOD EL 33020 HOLLYWOOD FIX 23020-6605 NEW: 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. 15 5, 21 Suite, Apt. #, etc. 115 S. 21 DO NOT WRITE IN THIS SPACE AVE AVE City & State 4. FEI Number 8883 Applied For FL DLLYWOOD ollywood Not Applicable Country \$8.75 Additional <sup>zio</sup> 33020 USA 5. Certificate of Status Desired 33020 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LAZAR, BRUCE E Street Address (P.O. Box Number is Not Acceptable) 2901 COLLINS AVE. MIAMI BEACH FL 33140 City 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 (NOTE: Registered Agent signature required when rainstating) DATE 9. This corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 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 (See criteria on back)\_\_\_\_\_ Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12 CR2E034 (9/99) President, owner ☐ Delete ☐ Change Addition TITLE TITLE steven chase NAME NAME \$17720 N. Bay Branch Rd STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE 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 ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS COY-ST-78 CITY-ST-ZIP ☐ Addition Change Delete TITLE DDE NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP

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 acturate 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 by order life empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

**SIGNATURE:** 

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

POCE

4-4-00

9549266406

☐ Change

☐ Addition

Date

Daytime Phone #



MUSIC AND ENTERTAINMENT

7-21-00

To whom It may concern, Please note that this originally sout outine. The paperwork note our change of aggress this was sent to us foradditional information, it was sent to the old address. We received this TODAY in the mail - please see Postmark 7-19-08 from Tallakasse. I am returning this todan as w Please accept the original and my appologing for not having a the intormation on the original pa WOTK

Jan Mendudl