

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000021382

1. Entity Name

PROPHECY RECORDS CORP.

**FILED**  
**Feb 16, 2000 8:00 am**  
**Secretary of State**

02-16-2000 90017 028 \*\*\*150.00

Principal Place of Business

Mailing Address

1325 MERIDIAN AVE., SUITE 11  
MIAMI BEACH FL 33139

1325 MERIDIAN AVE., SUITE 11  
MIAMI BEACH FL 33139-8029

B0015773



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2125 Biscayne Blvd.

Same as 102

Suite, Apt. #, etc.

Suite, Apt. #, etc.

230

City & State

MIAMI FL

City & State

4. FEI Number

65-0901482

Applied For

Not Applicable

Zip

33137

Country

Miami-Dade

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

SCHULZ, ERICO  
1325 MERIDIAN AVE., SUITE 11  
MIAMI BEACH FL 33139

Name

ERICO SCHULZ

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

900 BAY DR. # 701

City

Miami Beach

FL

Zip Code

33141

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. ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 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

TITLE ☐ Delete  
NAME P  
STREET ADDRESS SCHULZ, ERICO  
CITY-ST-ZIP 1325 MERIDIAN AVE., SUITE 11  
MIAMI BEACH FL 33139

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME VST  
STREET ADDRESS MARCELO BORQUEZ, GUSTAVO  
CITY-ST-ZIP 1325 MERIDIAN AVE., SUITE 11  
MIAMI BEACH FL 33139

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/2/2000

Date

Daytime Phone #

CR2F034 (9/99)