## 2002 UNIFORM BUSINESS REPORT (UBB)

SIGNATURE:

2002 UNIFORM BUSINESS REPORT (UBR)							FILED				
DOCUMENT # P99000048316							Jun 02, 2002 8:00 am Secretary of State				
TEMPO MUSIC, INC.							05-15-2002	•			
Principal Place of Business Mailing Address 21760 CLUB VILLA TERRACE 21760 CLUB VILLA TERRA BOCA RATON FL 33433 BOCA RATON FL 33433											
Principal Place of Business     Address     Address								<b>                                    </b>			
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Stat	te		City & State			4.	FEI Number <b>65-0924213</b>			plied For t Applicable	
Zip	Country		Zip Cour		ntry	5.	5. Certificate of Status Desired				
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent Name					
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE					Street Address (P.O. Box Number is Not Acceptable)						
CORAL GABLES FL 33134							,				
					City			FL	Zip Code	•	
8. The above	e named entity	y submits this statement for t	he purpose of changing its	register	ed office or	registered ag	gent, or both, in the State of Flo	rida.	1,		
SIGNATURE											
SIGNATORE	Signature, typed	or printed name of registered agent and	d title if applicable. (NOTE	: Registere	ed Agent signatu	re required when r	einstating)	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 \$150.0 After May 1, 2002 Fee will be \$55 Make Check Payable to Department			50.00	10. Election Campaign Fina Trust Fund Contribution	· -	<b>\$5.0</b> Added	May Be to Fees	
11.	·	OFFICERS AND D	<u> </u>	12.				CERS AND D	IRECTORS	S IN 11	
TITLE NAME STREET ADDRESS	PSD MATULLO, 21760 CLU	, pat p JB VILLA TERRACE	☐ Delete	TITL NAM STRI			:	` [	Change	Addition	
CITY-ST-ZIP		TON FL 33433		CITY	-ST-ZIP					;	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	21760 CL	, KAROL O JB VILLA TERRACE FON FL 33433	□ Delete						Change	☐ Addition	
TITLE NAME	BOOK IN	1014 1 E 00400	☐ Delete	TITL	E	د جيوموج ۽			Change	Addition	
STREET ADDRESS CITY-ST-ZIP				STRE	ET ADDRESS -ST-ZIP						
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLI NAM STRE		.,		[	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAM STRE	<u> </u>			ľ	Change	Addition	
	L certify that the lon this repor rporation or th	e information supplied with the tor supplemental report to the receiver or trustee empow	his filing does not qualify for ue and accurate and that me ered to execute this report a			ed in Section we the same oter 607, Flori	119.07(3)(i), Florida Statutes. I legal effect as if made under o da Statutes; and that my name	further certify ath; that I am appears in E	that the in an officer Block 11 or	formation or director Block 12 if	

Date

Daytime Phone #

5/15/2002-90065-011-\$150.00-\$150.00 Hackment 33814 UNIFORM BUSINESS\_REPORT (UBR) DOCUMENT # 1. Entity Name DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 21760 Club Villa Terr <u> Same</u> Suite, Apt. 4, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For **FEI Number** Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name DO NOT WRITE (P.O. Box Number is Not Acceptable) IN THIS SPACE City 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 again and title if applicable (NOTE: Registered Agent signeture required when reinstating) DATE January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intengible After May 1, Fee is \$550.00 Amended UBR is \$61.25 10. Election Campaign Financing \$5.00 May Be 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 11. OFFICERS AND DIRECTORS TITLE President CR2E034B (12/01 NAME MALE Put Matello STREET ADDRESS 21760 Clab Ville Terr Boca Proto Fb Vice President STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE arol Matello NAME NAME STREET ADDRESS 21760 Club Villa Terr STREET ADDRESS CITY-ST-7P CITY-ST-ZIP Baca Raton FL TITLE MILE MAG NAME STREET ADDRESS STREET ADDRESS DO\_NOT\_WRITE CITY-ST-ZIP CITY. ST. 70 TITLE TITLE THIS SPACE MALE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY.ST.70 TITLE THE NAME NALE STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME MALE STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 of 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 on an attachment with an address, with all other like percentage of