

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P99000063431		
1. Entity Name BRAVO MUSIC, INC.		
Principal Place of Business 1500 SE 3 COURT DEERFIELD BEACH, FL 33441	Mailing Address 1500 SE 3 COURT DEERFIELD BEACH, FL 33441	



DO NOT WRITE IN THIS SPACE

04272004 No Chg-P CR2E034 (10/03)

4. FFI Number 65-0934151	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent EGNER, THEODORE K 3607 EAST COMMERCIAL BLVD. FORT LAUDERDALE, FL 33308
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**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE _____
Signature typed or printed name of registered agent and title if applicable. (NOT: Registered Agent's signature required when rechartering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution: ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP MURAKAMI, KEN 2-3-16 KANNON-SHIAMACHI NISHI-KU HIROSHIMA 733-0036 JAPAN.
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS MURAKAMI, YURIKO 2-3-16 KANNON-SHIAMACHI NISHI-KU HIROSHIMA 733-0036 JAPAN.
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HUMPHREYS, MARK 1500 SE 3RD CT., #251 DEERFIELD BEACH, FL 33441
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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U000000149003
05/03/04-80169-021 150.00

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IN THIS SPACE**

12. 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 10 or Block 11; if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **4/27/04 (954) 571-8427**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date of Filing