

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90878 047 ***150.00

DOCUMENT # P990000086982

1. Entity Name

COOLMUSICVIDEOS.COM, INC.

Principal Place of Business

Mailing Address

**3324 WEST UNIVERSITY AVE.
 SUITE 121
 GAINESVILLE FL 32607**

**3324 WEST UNIVERSITY AVE.
 SUITE 121
 GAINESVILLE FL 32607-2540**

2. Principal Place of Business

**17731 N.W. 14th CT
 Suite, Apt. #, etc.**

3. Mailing Address

**17731 N.W. 14th CT
 Suite, Apt. #, etc.**

City & State

Miami, Florida

Zip

33169

Country

USA

City & State

Miami, Florida

Zip

33169

Country

USA

4. FEI Number

59-3602214

Applied For

☐ Not Applicable

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

WAKEFIELD, FRANZ A

**17731 NW 14TH COURT
 MIAMI FL 33169**

Name

FRANZ A. Wakefield

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

17731 N.W. 14th CT

City

MIAMI

FL

Zip Code

33169

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]
 Signature, typed or printed name of registered agent and title if applicable

FRANZ A Wakefield (President & Founder) 4/29/00
(Director) 4/29/00

(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.
 (See criteria on back) ☒

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

TITLE **D** ☐ Delete
 NAME **WAKEFIELD, FRANZ A**
 STREET ADDRESS **17731 N.W. 14TH COURT**
 CITY-ST-ZIP **MIAMI FL 33169**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

TITLE ☐ Change ☐ Addition
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 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 all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.29.2000 (305) 512-6709

Date

Daytime Phone #