

2002 UNIFORM BUSINESS REPORT (UBR)

0126906 AT

DOCUMENT # P99000090547

1. Entity Name
GRIFCO RECORDS, INC.

FILED

03 JAN 17 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
15816 2ND STREET EAST
REDINGTON BEACH FL 33708

Mailing Address
P.O. BOX 8893
ST. PETERBERG FL 33738



REINSTATEMENT

DO NOT WRITE IN THIS SPACE

03

2. Principal Place of Business

15816 2nd STE
Suite, Apt. #, etc.

3. Mailing Address

15816 2nd STE
Suite, Apt. #, etc.

City & State
Redington Bch, FL
Zip
33708
Country
USA

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Zip
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Country
USA

4. FEI Number
59-3603145

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

DIMARCO, ROBERT F CPA
3444 EAST LAKE ROAD
SUITE 412
PALM HARBOR FL 34685

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. I am familiar with, and accept the obligations of registered agent.

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

(NOTE: Registered Agent signature required when reinstating)

DATE 1/14/03

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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
NAME D GRIFFITH, BRENT
STREET ADDRESS 15816 2ND STREET EAST
CITY-ST-ZIP REDINGTON BEACH FL 33708

TITLE
NAME
STREET ADDRESS 200008726792
CITY-ST-ZIP 12/03/02--01059--035 **200.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS 200008726792
CITY-ST-ZIP 10/31/02--01047--016 **550.00

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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

BRENT S. GRIFFITH 12/14/02 727-319-3408

CR2E034 (4/02)