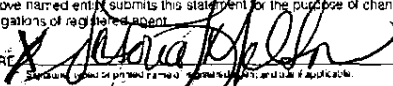
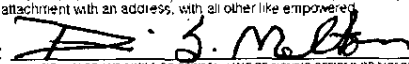


FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91327 024 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

000JJ0041

DOCUMENT # P99000094740																										
1. Entry Name ELEKTROJAZZ ENTERTAINMENT, INC.																										
Principal Place of Business 8544 VALENCIA VILLAGE LANE # 108 ORLANDO, FL 32825		Mailing Address 8544 VALENCIA VILLAGE LANE # 108 ORLANDO, FL 32825																								
2. Principal Place of Business 4407 Blonigen Ave Suite, Apt. #, etc.		3. Mailing Address 4407 Blonigen Ave Suite, Apt. #, etc.																								
City & State Orlando FL		City & State Orlando FL																								
Zip 32812		Zip 32812																								
Country Orange		Country Orange																								
4. FEI Number 59-3615378		Applied For Not Applicable																								
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required																										
6. Name and Address of Current Registered Agent MELTON, VICTORIA 8544 VALENCIA VILLAGE LANE # 108 ORLANDO, FL 32825		7. Name and Address of New Registered Agent Name Melton, Victoria Street Address (P.O. Box Number is Not Acceptable) 4407 Blonigen Ave. City Orlando FL Zip Code 32812																								
8. The above named entry 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:  DATE: 4/25/2003 (NOTE: Registered Agent's signature required when resigning.)																										
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees																								
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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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:  DATE: 4/25/2003 DAYTIME PHONE: 407-466-3359																										