## FILED **√2000 UNIFORM BUSINESS REPORT (UBR)** May 12, 2000 8:00 am DOCUMENT # **P99000110880** Secretary of State Entity Name A JORDAN MUSIC PRODUCTION INC. 05-12-2000 90864 001 \*\*\*\*\*8.75 05-12-2000 90864 002 \*\*\*150.00 Principal Place of Business Mailing Address 12472 LAKE UNDERHILL RD., STE. 108 12472 LAKE UNDERHILL RD., STE. 108 ORLANDO FL 32828-7144 CTLC::DC FL 32828-7144 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name JORDAN, AMNERIS Street Address (P.O. Box Number is Not Acceptable) 12472 LAKE UNDERHILL RD., STE. 108 ORLANDO FL 32828-7144 Zip Code FL 8. The above named entire submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE (NOTE: Registered Agent signature required FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. CR2E034 (9/99) CEO PRESIDENT Change | Addition ☐ Delete TITLE TITLE JAMES F. JORDAN JAMES F. JORDAN NAME NAME 12472 Lake Underhill Rd Stelog 10361 Dylan St. # 1013 STREET ADDRESS STREET ADDRESS FL 32805 CITY-ST-ZIP CITY-ST-ZIP ORL. FL. 32828 7144 TRES. / F.N. OFFICER ☐ Addition ☐ Delete TITLE TITLE AMNER'S JORDAN AMNERIS JORDAN 10361 Dylan St #1013 026 FC 52825 NAME NAME 12472 Lake under hill Rd. Ste 108 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORL . FL. 32628-7144 CITY-ST-ZIP SHARE HOLDER SILENT PARTNER Delete ☐ Addition YZA MARIA LIRIANO-REREZ TITLE 42A MARIA LIAIANO-PEREZ NAME NAME NORTH BERMUANDO CIR NORTH BECMUANU EIR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Apopka FL 32703 Apopka FL 32703 CITY-ST-ZIP DIRECTOR OF CREATIONS D (MARKetTAG) ☐ Addition TITLE ☐ Delete TITLE hichard b. BRAZi MicHARD LORAZI NAME NAME 2210 BRAND CARYMEN CT #1913 2210 LARAND CAYMEN ET #1713 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Kissimee , FL 3474/ CITY-ST-ZIP Kissimmee FL 24741 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IF ☐ Addition Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

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

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