FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # \$41989

(2)

1. Corporation POP'S N	MUSIC, INC.	<i>(2)</i>							
Principal Place	of Business	Mailing Address					BIJA BIBN DIDN DI		(1 6 1)
1237 SW 4 AVE FT LAUDERDAL		1237 SW 4 AVE FT LAUDERDALE FL 333	1237 SW 4 AVE FT LAUDERDALE FL 33315-1557						
						3. Date Incorporated or Qualified 04/01/1991	3a. Date of 04/01/1	996	
	ace of Business	2a. Mailing Address	——————————————————————————————————————			4. FEI Number			plied For
21	ll oto	26 Cuito Ant # ata	Suite, Apt. #, etc.			65-0255587	6 (t Applicable
Suite, Apt. #, etc.		27				5. Certificate of Status Desired		Fee Re	Additional ouired
22] City & State			City & State			6. Election Campaign Financing			May Be
23		28	¬ ·			Trust Fund Contribution		Added to	
Zιρ	Country	Zip	Country			8. This corporation has liability for i			199.032.
24	25	29	30			Florida Statutes Yes No			
	9. Name and Address of Curre	int Registered Agent		81	Name	10. Name and Address of New Re	gistered Agen	1	
	KIN, EDWARD			"	Name				
	SHERIDAN ST		Ţ	82	Street Addre	ess (P.O. Box Number is Not Acceptab	ile)		
	E 301		-	83				——— <u> </u>	
ПОЦ	LYWOOD FL 33021]_	03					····
			11	84	City		FL 85	Zip C	Code
11. Pursuant t	to the provisions of Sections 607.05	502 and 607.1508, Florida State	utes, the ab	<u>Т</u>	-named corp	oration submits this statement for the p		naing its	s registered
office or re	agistered agent, or both, in the State	le of Florida. Such change was	authorized	by t	the corporati	oration submits this statement for the p ion's board of directors. I hereby accep	ot the appointm	nent as i	registered
	If Refline: with and popeliting opin	gations or, occion overcoor, i	TOTOD DUAL	JIGO.	•				
SIGNATURE	Skyr at ire, typed or printer name of registered a	gent and title 4 applicable. (NC	OTE: Registered	Agent	nt signature require	ed when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC			
101vE	D	☐ DELETE	1.1 1111	LE			L.J (Change	Addition
NAME	PENNINGTON, CHARLES		1.2 NA						
STREET ADDRESS	1237 SW 4 AVE			1.3 STREET ADDRESS					
C/TY+ST+ZIP				1.4 CITY-ST-ZIP				Change	Addition
TITLE				2.1 TITLE 2.2 NAME			L \	>µatiRe	L.J Abbilion
NAME					- DRECO				
STREET ADDRESS			2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP						
COTY - ST- ZIF		DELETE	2. 4 CH		1-2iP	I I		Change	Addition
NAME			3 2 NAME						
STREET ADDRESS			3.3 STREET AD		ADDRESS				
CHY+S1+7IP			3.4. CIT	TY-ST	T-ZIP				
THLE				4.1 TITLE				Change	Addition
NAM:			4. 2 NA	ME					
STREET ADDRESS			4.3 STP	AEET A	ADDRESS				
CITY-ST-ZIP			4.4 CiT	Y-ST	i-ZIP				
THLE		L DELETE	. 5.1 TITU				L) (Change	Addition
NAME			5.2 NAI						
STREET ADDRESS					address (
CITY-S1-ZiF		DELETE	5 4 CITY -		-ZIP			Change	Addition
TITLE NAME		☐ DELETE		61 TITLE 62 NAME			ш,	Nigithe	LI ROGGIO
1					ADDRESS				
STREET ADDRESS			6.4 CIT	-					
14. I do nereb	by certify that the information suppli	ed with this filing does not qua	lify for the e	exem	notion stated	in Section 119.07(3)(i), Florida Statute	s. I further cert	ify that t	the
information Lam an of	n indicated on this annual report or	supplemental annual report is or the receiver or trustee empo	s true and a owered to ex	cour	rate and that	my signature shall have the same lega t as required by Chapter 607, Florida S	al effect as if ma	ade und	der oath; that