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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90185 005 ***150.00

DOCUMENT # V10298

ENCORE MUSIC EMPORIUM, INC.

Principal Place of Business Mailing Address							
11614 US 19		11614 US 19					
PORT RICHEY	FL 34668	PORT RICHEY FL 34668					
US		US		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed		·
					01/27/1992	·	
Principal Place of Business 2a. Mailing Address					4. FEI Number	Ap	plied For
21 26					59-3110836	No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75	
22 27 27					5. Certificate of Status Desired	Fee Re	quired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation owes the curren	t year Intangible	[
24	25 29 30			Personal Property Tax.			
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	jistered Agent	
			81	Name A&	IICHAEL TRAPANI		ļ
LUND, DIANE					ess (P.O. Box Number is Not Acceptable	0)	
10014 GROVE DRIVE					810 JUDITH CRESCENT		ļ
PORT RICHEY FL 34668					D/10 00 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
			84				
				City P	ORT RICHEY		Code
44 Durawant	to the provisions of Sections 607.050	2 and 607 1509 Florida Statutes t	he above		oration submits this statement for the pu		
office or r	registered agent, or both, in the State (of Florida. Such change was autho	rized by ti	ne corporatio	on's board of directors. I hereby accept t	he appointment as re	gistered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Florida	Statutes.				}
SIGNATURE	while I -	<u> </u>			t when reinstating)	DATE 15,1999	
40	Signature, typed or printed name of registered agen OFFICERS AN		13.	signature required	ADDITIONS/CHANGES TO OFFIC	. 	
12.	P	D DIKECTORS DELETE	1,1 TITLE		ADDITIONO/CHARGEO TO OFFIC	Change	Addition
	1 *	U OLCETE		1			
NAME	TRAPANI, MICHAEL		1.2 NAME	ì			
STREET ADDRESS	10.000		1.3 STREET A	ADDRESS			1
CITY-ST-ZIP	PORT RICHEY FL 34668		1.4 CITY-ST-	ZIP			
TITLE	VP	☐ OELETE	2.1 TITLE	Ì		Change	Addition
NAME	DLVGOKINSKI, EDWARD	1	2.2 NAME				Í
STREET ADDRESS		[2.3 STREET ADDRESS				
CITY-ST-ZIP	PORT RICHEY FL 34668		2.4 CITY-ST-ZIP				
TITLE	T	☐ DELETE	31 TITLE			Change	Addition (
NAME	TRAPANI, BRIAN	1	3.2 NAME				}
STREET ADDRESS	7810 JUDITH CRESCENT		3.3 STREET A	ODRESS			
CITY-ST-ZIP	DODE DIGUELLE CARRE		3.4. CITY-ST-	.ZIP ·			
TITLE			4.1 TITLE			☐ Change	☐ Addition
NAME		j	4. 2 NAME			•	
STREET ADDRESS			4.3 STREET A	ODRESS			
CITY-ST-ZIP		, i	4.4 CITY-ST-		•		į
TITLE			5,1 TITLE			[] Change	Addition
	}		5.2 NAME		•		-
NAME			5.3 STREET A	INDRESS			,
STREET ADDRESS	Į.		JOSINGELA	AND LESS			Į.

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

□ DELETE

SIGNATURE:

CITY-ST-ZIP

TITLE

NAME

FEBRUARY 15 1999 727-862: 288Z

Addition

Change