

2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Aug 04, 2005 8:00 am
Secretary of State

08-04-2005 90002 043 ***158.75

DOCUMENT # V11750



1. Entity Name

SANDBAR MUSIC INC.

Principal Place of Business

2941 NOBB HILL ROAD
APARTMENT 306
SUNRISE FL 33322

Mailing Address

2941 NOBB HILL ROAD
APARTMENT 306
SUNRISE FL 33322



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0312446

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

1st MOORE

CR2E034 (10/04)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CARMODY JOHN R
2941 NOB HILL RD BLDG 173
APT 306
SUNRISE FL 33322

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2005 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
CARMODY, JOHN R.
2941 NOBB HILL RD., #306
SUNRISE FL 33322 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

John R. Carmody JOHN R. CARMODY, DIRECTOR 7/25/05 (954-749-8663)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

50059808
#VII750

July 28, 2005

Florida Department of State
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sirs:

I am sending this "For Profit Corporation Annual Report" late due to an illness situation. I am receiving care for pancreatic cancer and also parkinson's disease which requires me to frequently receive care at Massachusetts General Hospital in Boston.

In a rush to leave on a trip to Boston in the Spring, I mailed a number of pieces of mail together. The Annual Report was among them. I don't know what happened but I have since found out that none of that mail was ever delivered. Finally, I received your postcard. I called your Office in Tallahassee and was told by your Office to submit a replacement form which they sent to me and to include a letter explaining my circumstances, to include a check for \$150.00 and perhaps the late fee would be waived this time.

I have never been late with a filing before so I would appreciate your consideration.

Thank you very much.

Very truly yours,

John R. Carmody

John R. Carmody