2002 UNIFORM BUSINESS REPORT (UBR)

May 15, 2002 8:00 am Secretary of State P97000095954 DOCUMENT # 1. Entity Name BASS BOY MUSIC, INC. 05-15-2002 90123 025 ***158.75 and chiched words and the Principal Place of Business Mailing Address 140 ORCHID WOODS COURT C/O STUART A DITSKY GPA PC 733 THIRD AVE #1900 #4B NEW YORK NY 10017 **DELTONA FL 32725** HS 2. Principal Place of Business 3. Mailing Address 2616 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3484495 Lauderdale Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YALE, BRIAN 140 ORCHID WOODS COURT #4B **DELTONA FL 32725** 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 10. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ্ৰেন After May 🗓 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees \Box Make Check Payable to Department of State OFFICERS AND DIRECTORS ALL TO LEAD A LEAD AND LOCAL TO LOCAL TO LEAD AND LOCAL TO LO ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. de OBCHID MCSSS CBSSE. 12. TITI E TITLE ☐ Addition ☐ Delete Brian Vale YALE, BRIAN 2616 Bayview Drive NAME NAME STREET ADDRESS 140 ORCHID WOODS COURT STREET ADDRESS Lauderdale FL 33306 **DELTONA FL 32725** CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITE F TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. Thereby 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 empoyered to exercise 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

SIGNATURE:

FILED