


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

**FILED
May 05, 2003 8:00 am
Secretary of State**

05-05-2003 92195 020 ***158.75

DOCUMENT # P97000095954
 1. Entity Name Bass Boy Music, Inc.



DO NOT WRITE IN THIS SPACE

90126081

2. Principal Place of Business 2616 Bayview Drive
 Suite, Apt. #, etc. _____
 3. Mailing Address 9000 Sunset Blvd
 Suite, Apt. #, etc. 1500

DO NOT WRITE IN THIS SPACE

City & State Fort Lauderdale, FL City & State Los Angeles, CA 4. FEI Number 59-3484495 Applied For
 Zip 33306 Country _____ Zip 90069 Country _____ Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

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 _____

January 1 - May 1 Fee is \$150.00
 After May 1, Fee is \$550.00
 Amended UBR is \$61.25
 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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<u>P</u>	<u>Yale, Brian</u>	<u>2616 Bayview Drive</u>				
		<u>Fort Lauderdale, FL</u>	<u>33306</u>				

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/25/03
Date

212-557-2727
Daytime Phone #

CR2E034B (12/02)