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

Mailing Address 903 W. 77 ST.

HIALEAH FL 33014

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # **H47123** 

1. Corporation Name

903 W. 77 ST. HIALEAH FL 33014

Principal Place of Business

DANIMARI MUSIC PUBLISHER CORPORATION

							3. Date Incorporated or Qualifed 03/14/1985				
2. Principal Place of Business 2a. Mailing Address						,	4. FEI Number	Ap	olied For		
21	ass of Buomisss	26	, , , , , , , , , , , , , , , , , , ,				59-2539814	<del>- +</del>	Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.				E Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State			City & State				6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
<b>23</b> Zip	Country	28	Zip	Cou	ntry		This corporation owes the current year Intangible		7. 663		
	25 29 30						1 7 4	Personal Property Tax.			
24     25   29     30     30					10. Name and Address of New Registered Age						
	J. 1141110 41111 1141100 01 1141101				81	Name					
MARRERO, ESTEBAN RAUL							(20.2.				
903 W. 77 ST.					82	Street Ad	Address (P.O. Box Number is Not Acceptable)				
HIALEAH FL 33014				1	83			··			
					84	City	FI 85	Zip (	Code		
44 0	to the amulsions of Sections 507 050	12 and 6	07 1508 Florida Statuto	e the s	hove	anamed or	corporation submits this statement for the purpose of change	ing its	registered		
office or re	egistered agent, or both, in the State	of Florid	da. Such change was au	itnonzec	ועסו	tne corpor	ration's board of directors. I hereby accept the appointment	as re	gistered		
agent. I ai	m familiar with, and accept the obliga	ations of	, Section 607.0505, Flor	ida Statı	utes.						
SIGNATURE			# # # # # # # # # # # # # # # # # # #				Quired when reinstating) DATE				
	Signature, typed or printed name of registered age			13.	Ageni	signature requ	Quired when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTO	RS IN 12		
12.	OFFICERS AND DIRECTORS  PD DELETE			<b>→</b> —	1.1 TITLE		ADDITIONS/GNAIGES TO GIT IDENT AND BIN		Addition		
TITLE	MARRERO, ESTEBAN RAUL		C berrie	1.2 N							
NAME	903 W. 77 ST.					1000000					
STREET ADDRESS	HIALEAH FL 33014					ADDRESS	•				
CITY-ST-ZIP	HIALEAN FL 33014		☐ DELETE	1.4 CI		- ZIP		iange	Addition		
TITLE				2.1 TI				Lingo			
NAME				2.2 NA							
STREET ADDRESS						ADDRESS			i		
CITY-ST-ZIP				2 4 C		T-ZIP		20000	Addition		
TITLE			☐ DELETE	3.1 TI				ange	☐ Addition		
NAME				3.2 NA					!		
STREET ADDRESS				3.3 ST	REET	ADDRESS					
CITY-ST-ZIP				3.4. C		T- ZIP					
TITLE			☐ DELETE	4.1 TF	LE		□ C	nange	☐ Addition		
NAME				4. 2 N	AME						
STREET ADDRESS				4.3 S1	REET	ADDRESS					
CITY-ST-ZIP				4.4 CI	TY-ST	-ZIP					
TITLE			☐ DELETE	5.1 TR				nange	☐ Addition		
NAME				5.2 NA		-					
STREET ADDRESS				5.3 ST	REET	ADDRESS					
CITY-ST-ZIP				5.4 CI		-ZIP					
TITLE			☐ DELETE	6.1 TF	LΕ			ange	Addition		
NAME				6.2 N	ME				ſ		
STREET ADDRESS				6.3 ST	REET	ADDRESS			ľ		
CITY-ST-ZIP				6.4 CI	TY-ST	- ZIP					
14. I hereby c	ertify that the information supplied w	ith this f	iling does not qualify for	the exe	mpti	on stated i	in Section 119.07(3)(i), Florida Statutes. I further certify that	t the in	formation		

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

SIGNATURE:

**FILED** 

Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90081 006 \*\*\*150.00

DO NOT WRITE IN THIS SPACE