


**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90207 021 \*\*\*150.00

<b>DOCUMENT # P00000068692</b> 1. Entity Name SONGO SOUNDS RECORDS, INC.	
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Principal Place of Business 2500 S W 107 AVE SUITE 8 MIAMI, FL 33165	Mailing Address 2500 S W 107 AVE SUITE 8 MIAMI, FL 33165
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**60035356**



04162008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1028912	Applied For Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  MATTA, EDGARDO R SR 16205 SW 78 TERRACE MIAMI, FL 33193
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**DO NOT WRITE  
IN THIS SPACE**

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, 2008 Fee will be \$550.00**

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	PD PEREZ, TOMAS J 1558 SW 143 COURT MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MATTA, EDGARDO 1558 SW 143 COURT MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PEREZ, NIRIAM M 1558 SW 143 CT MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PEREZ, SANDRA M 1558 SW 143 CT MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/08  
Date

305-221-8176  
Daytime Phone #