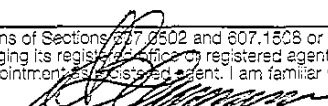


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1994		 FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
1. Corporation Name BERRIOS RECORDS, CORP.		DOCUMENT # G97886 (7)	
Mailing Address 3000 BISCAYNE BLVD. SUITE 102 MIAMI FL 33137		Principal Place of Business 3000 BISCAYNE BLVD. SUITE 102 MIAMI FL 33137	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. Mailing Address 21 785 W. 83 ST.		2a. Principal Place of Business 26 785 W. 83 ST.	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27	
City & State 23 HALEAH, FLORIDA		City & State 28 HALEAH, FL.	
Zip 24 33014		Country 25 U.S.A.	
3. Date Incorporated or Qualified 04/09/1984		3a. Date of Last Report 03/15/1993	
4. FEI Number 59-2436897		Applied For Not Applicable	
5. Certificate of Status Desired \$8.75 Additional Fee Required ☒		6. Election Campaign Financing Trust Fund Contribution ☐	
7. Nonprofit Exempt from \$138.75 Supplemental Fee ☐		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No			
9. Name and Address of Current Registered Agent BERRIOS, DANIEL 771 SW 64 TERR. PEMBROKE PINES FL 33023		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
85 Zip Code		FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505 or 617.0503, Florida Statutes.			
SIGNATURE 		DATE 1-7-97	
12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE P		1.1 TITLE	
1.2 NAME BERRIOS, DANIEL		1.2 NAME	
1.3 STREET ADDRESS 771 SW 64 TERR.		1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP PEMBROKE PINES FL		1.4 CITY-ST-ZIP	
2.1 TITLE V		2.1 TITLE	
2.2 NAME GONZALEZ, SERGIO		2.2 NAME	
2.3 STREET ADDRESS 10300 NW 58 AVE.		2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP MIAMI FL		2.4 CITY-ST-ZIP	
3.1 TITLE S/T		3.1 TITLE	
3.2 NAME BERRIOS, GLADYS		3.2 NAME	
3.3 STREET ADDRESS 771 SW 64 TERR.		3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP PEMBROKE PINES FL		3.4 CITY-ST-ZIP	
4.1 TITLE		4.1 TITLE	
4.2 NAME		4.2 NAME	
4.3 STREET ADDRESS		4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as provided in Chapter 607 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.			
SIGNATURE: 		DANIEL BERRIOS 2-15-95 305-822-7585	

FILED

97 JAN -8 AM 10: 23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

REINSTATEMENT

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