

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000021699

**Entity Name:** XPERIMENTO MUSIC INC

**Current Principal Place of Business:**

8340 NW 8TH ST  
N-10  
MIAMI, FL 33126

**Current Mailing Address:**

8340 NW 8TH ST  
N-10  
MIAMI, FL 33126 US

**FEI Number:** 27-2100636

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TORRES, EMILIANO  
8340 NW 8TH ST  
N-10  
MIAMI, FL 33126 US

*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name TORRES, EMILIANO  
Address 8340 NW 8TH ST # N-10  
City-State-Zip: MIAMI FL 33126

Title DIRECTOR  
Name BOLAND, LEO L  
Address 7101 NW 20TH CT  
City-State-Zip: SUNRISE FL 33313

Title D  
Name SIERRA, CAMILO  
Address 1690 SW 27 AVE. #306  
City-State-Zip: MIAMI FL 33145

Title DIRECTOR  
Name CINTRON, DEREK  
Address 14770 LEWIS RD.  
City-State-Zip: MIAMI FL 33014

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** EMILIANO TORRES

**PRESIDENT**

**03/31/2015**

Electronic Signature of Signing Officer/Director Detail

Date