

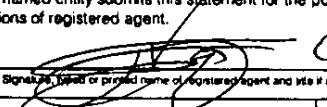
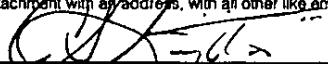
2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2007 8:00 am
Secretary of State

04-06-2007 90046 015 ***150.00

4/1

66015304

DOCUMENT # F03000000728			
1. Entity Name EMUSICA HOLDINGS, INC.			
Principal Place of Business 10544 NW 26 STREET SUITE E-104 MIAMI, FL 33172		Mailing Address 10544 NW 26 STREET SUITE E-104 MIAMI, FL 33172	
2. Principal Place of Business - No P.O. Box # 5757 Blue Lagoon Drive Suite, Apt. #, etc. Suite 230 City & State Miami, FL Zip 33126 Country USA		3. Mailing Address 5757 Blue Lagoon Drive Suite, Apt. #, etc. Suite 230 City & State Miami, FL Zip 33126 Country USA	
02272007 Chg-P CR2E034 (12/06)		4. FEI Number 06-1543849	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent BREIL, GIORA W DPS 10544 NW 26 STREET SUITE E-104 MIAMI, FL 33172		7. Name and Address of New Registered Agent Name Luis Joel Vazquez Street Address (P.O. Box Number is Not Acceptable) 5757 Blue Lagoon Drive, Suite 230 City Miami FL Zip Code 33126	
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:  Comptroller DATE: 4/17/07 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARLOW, ANTHONY 10544 NW 26 ST, SUITE E104 MIAMI, FL 33172 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Harlow, Anthony 5757 Blue Lagoon Drive, Suite 230 Miami, FL 33126 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS WILLIAMS, SIMON 10544 NW 26TH STREET SUITE E-104 MIAMI, FL 33172 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Livingston, G.S. III 5757 Blue Lagoon Drive, Suite 230 Miami, FL 33126 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIVINGSTON, G.S. III 10544 NW 26 STREET SUITE E-104 MIAMI, FL 33172 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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:  G.S. LIVINGSTON III		Date 03-26-07 305-599-2011 Daytime Phone #	