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**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 24 1997 8:00am

| ANNU  | POHATION<br>JAL REPORT<br><b>1997</b>        | Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |                               |                                      |                                 | Secretary of State             |  |                                    |                      |                         |
|---|--|---|-------------------------------|--------------------------------------|---------------------------------|--------------------------------|--|------------------------------------|----------------------|-------------------------|
| DOCUMENT # H27579 1. Corporation Name ENARESS MUSIC, INC.  Principal Place of Business 408 S. ANDREWS AVE.  408 S. ANDREWS AVE. |  |   |                               |                                      |                                 |                                |  |                                    |                      |                         |
|   |  |   |                               |                                      |                                 |                                |  |                                    |                      |                         |
| FT. LAUDERDA  | ALE FL 33301                                 |   | FT. LAU                       | DERDALE FL 333                       | 01-2850                         |                                | 3. Date Incorporated or Qualified  | Sa. Date of I                      | ast Rep              | port                    |
| 2. Principal P  | lace of Business                             |   | 2a Maili                      | ing Address                          |                                 |                                | 10/29/1984<br>4. FEI Number  | 04/30/19                           |                      | lied For                |
| 21  | idee of Educations                           |   | 26                            | ing Addiese                          |                                 |                                | 65-0138177   | <u> </u>                           |                      | Applicable              |
| Suite, Apt.   | #, etc                                       |   |                               | 3, Apt. #, etc.                      |                                 |                                | 5. Certificate of Status Desired   |                                    | .75 Ad               |                         |
| 22 City & Stat  | (6   |   | 27 City                       | & State                              |                                 |                                | 6. Election Campaign Financing   |                                    | ee Req<br>5.00 N     |                         |
| 23  |  |   | 28                            |                                      |                                 |                                | Trust Fund Contribution  |                                    | dded to              |                         |
| Z)p   | Country                                      |   | Zip                           |                                      | Country                         | 1                              | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No   |                                    |                      |                         |
| 24  | [25]<br>9. Name and                          | Address of Current  | 29<br>Registered              | Agent                                | 30                              | <del> </del>                   | 10. Name and Address of New Re   |                                    |                      |                         |
|   | YIA, VIRGINIA Y.                             |   |                               |                                      | 81                              | Name                           |  |                                    |                      |                         |
|   |  |   |                               |                                      | 82                              | Street Add                     | dress (P.O. Box Number is Not Acceptate  | ole)                               |                      |                         |
| FT.   | LAUDERDALE F                                 | L 33301   |                               |                                      | 83                              |                                |  | ···                                | <del></del>          |                         |
|   |  |   |                               |                                      |                                 |                                | w  | <del></del>                        |                      |                         |
|   |  |   | $\sim$                        |                                      | 84                              | , , ,                          |  | FL 85                              | Zip Co               |                         |
| 11. Pursuant  | to the provisions of                         | of Sections 607.0502<br>or both, in the State                 | arid 607.15<br>Florida Su     | 08, Florida Statu                    | ites, the abov                  | e-named cor                    | poration submits this statement for the pation's board of directors. I hereby accept   | ourpose of changot the appointment | ging its             | registered<br>egistered |
| agent La  |  |   | ons of Sec                    | tion 607.0505, F                     | lorida Statute                  | S.                             | and the state of t | at the agreement                   |                      | , g                     |
| SIGNATURE.  | Signature, lyced or print                    | d nanio of registered agent                                   | and tile if applic            | Sable (No                            | TE alstered Ao                  | ent signature requ             | ared when reinstating)   | DATE                               |                      |                         |
| 12.   |  | OFFICERS AND  | DIRECTOR                      | ·                                    | 13.                             |                                | ADDITIONS/CHANGES TO OFFIC   |                                    |                      |                         |
| THEF  | D<br>Cayla, Edwa                             | מו. מ אח חסו  |                               | DELETE                               | 1,1 TITLE                       | · ·                            |  | CH                                 | ange                 | Addition                |
| NAME<br>STREET ADDRESS  | 114 SW 10Th                                  |   |                               |                                      | 1.2 NAME                        | T ADDRESS                      |  |                                    |                      | ļ                       |
| CITY - ST - ZIP   | FT. LAUDERD                                  |   |                               |                                      | 1.4 CITY-5                      | 1                              |  |                                    |                      |                         |
| Title   | CSD  |   |                               | DELETE                               | 2.1 TITLE                       |                                |  | ☐ Ct                               | ange                 | ☐ Addition              |
| NAME  | CAYIA, VIRGI                                 |   |                               |                                      | 2.2 NAME                        |                                |  |                                    |                      |                         |
| STREET ADDRESS  | FT. LAUDERD                                  | EWS AVE. #108   |                               |                                      |                                 | ADDRESS                        |  |                                    |                      |                         |
| COTY - ST - ZOP<br>TOLE   | n LAUDERL                                    | MLE FL  | ·                             | DELETE                               | 2.4 CITY-<br>3.1 TITLE          | ST-ZIP                         |  | □ CF                               | nanne                | Addition                |
| NAME  | CAYIA, PAUL                                  | INA C.  |                               | to other                             | 3.2 NAME                        |                                |  | <u></u> 0                          |                      | 7.000001                |
| STREET ADDRESS  | 408 S. ANDE                                  | REWS AVE #106   |                               |                                      |                                 | ADDRESS                        |  |                                    |                      | ļ                       |
| CITY-SI-7IP   | FT. LAUDERO                                  | ALE FL  |                               | - I-1                                | 3.4. City -                     | ST-ZIP                         |  |                                    |                      |                         |
| THIE  | }  |   |                               | DELETE                               | 4.1 TITLE                       | 1                              |  | LJ Ch                              | hange                | Addition                |
| NAME<br>STREET ADDRESS  |  |   |                               |                                      | 4. 2 NAME                       | ADORESS                        | ///  | ^                                  |                      | ļ                       |
| GITY-ST ZIF   |  |   |                               |                                      | 4.3 STREET                      | - 1                            | n . VII)   |                                    |                      |                         |
| 1/JUF   |  |   |                               | DELETE                               | 5.1 TITLE                       | 1                              | Made   |                                    | hange                | Addition                |
| NAME  |  |   |                               |                                      | 5.2 NAME                        | }                              | (1.0)  |                                    |                      |                         |
| STREET ADDRESS  |  |   |                               |                                      |                                 | ADDRESS                        |  |                                    |                      | 1                       |
| CHY-ST-7IP<br>TITLE   | ļ  |   |                               | DELETE                               | 5.4 CITY-5<br>6.1 TITLE         | 51-ZIP                         | d months are   | ه کو د                             | nange                | Addition                |
| NAME  |  |   |                               |                                      | 62 NAME                         |                                | 40000215<br>-04/25/97010   | , コ 「コザ<br>78ハくく                   | -                    |                         |
| STREET ADDRESS  |  |   |                               |                                      | 6.3 STREE                       | ADDRESS                        | ***330.00  | 10 000                             |                      |                         |
| C(TY - \$1 - 7/P  |  |   |                               |                                      | 6.4 CITY - 5                    | ST-ZIP                         |  |                                    |                      |                         |
| <ol> <li>14. I do here!<br/>informatic</li> </ol>   | by certify that the i<br>on indicated on thi | intormation supplied i<br>s annual report or sup              | with this filir<br>oplemental | ng does not qual<br>annual eport is  | ity for the exe<br>true and acc | emption state<br>urate and tha | ed in Section 119.07(3)(i), Florida Statute<br>at my signature shall have the same legs  | s. I further certif                | y that th<br>de unde | ie<br>er oath; that     |
| I am an o<br>appears i  | itticer or director o<br>in Block 12 or Bloc | t the corporation or th<br>ck 13 if thanged, or c             | ne receiver i<br>in an atlach | or trustee einpol<br>ment with an ad | wered to exec<br>Idress.        | oute this repo                 | ed in Section 119.07(3)(i), Florida Statute<br>at my signature shall have the same legs<br>ort as required by Chapter 607, Florida S   | itatutes; and tha                  | (Z)*                 | me                      |

SIGNATURE: