FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K18497

(3)

CRITERIA RECORDING STUDIOS, INC. Principal Place of Business Mailing Address 1755 NE 149TH ST. 1755 NE 149TH ST. MIAMI FL 33181-1007 MIAMI FL 33181 3. Date Incorporated or Qualified 3a. Date of Last Report 03/17/1988 04/29/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0037177 Not Applicable 26 Suite, Apt. #, etc Suite Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032 Yes Yes Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name SCHNIEDER, RITA 10800 BISCAYNE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) **STE 510** 83 **MIAMI FL 33161** 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 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, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DÄTE (NOTE: Registered Agent signature required when reinstating) (96/6)12. OFFICERS AND DIRECTORS 13. DETETE Change ___ Addition TITLE LEVY, JOEL M. 1.2 NAME NAME 1755 NE 149TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIF STD DELETE Change Addition TITLE 2.1 THE HAYNE, WILLARD 2.2 NAME NAME 1755 NE 149TH ST. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP Addition Change ۷D DELETE 3.1 11111 TITLE Levy, Harry A. NAME 3.2 NAME 10800 BISCAYNE BLVD STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY - \$1 - 7/P DELETE Change Addition TITLE 43 1110 reeser, Dennis 4.2 NAME NAME 1755 NE 149TH ST. 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL 4 4 CITY - ST - 7IP CITY-ST-ZIP DELETE Change Addition 5.1 HH: F TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIF Change Addition TITLE DELETE 61100 NAME 6.2 NAME

14. I do hereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. 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 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 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

CICALATURE

STREET ADDRESS

CITY-ST-ZIE

sel M. Jour JOEL

4/25/97 (305)947-5611

FILED

May 02 1997 8:00am

Secretary of State