LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000012417



FILED Apr 25, 2003 8:00 am Secretary of State 04-25-2003 90759 037 ****50.00

1. Entity Nam	MUSIC INVESTMEN	TS L.C.	0123 2003	J0137 031	36.00			
	DO NOT WRITI	E IN THIS S	SPAC	E			÷	
2. Principal Place of Business 2588 SW 27TH AVE		3. Mailing Address 2588 SW 27TH AVE		,				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number OF4454005 Applied For				
MIAMI, FL		MIAMI, FL		651154385 Applicable				
Zip 33133	Country U.S.	Zip 33133	Country U.S.		5. Certificate of Status Desired \$5.00 Additional Fee Required			
N					7. Name and Address of Current Registered Agent			
DO NOT WRITE				Name ANTONIO GARCIA Street Address (P.O. Box Number is Not Acceptable)				
IN THIS SPACE			,,	Street Address (I	P.U. Box Number is Not Acceptable)			
		ACL		2588 SW 27TH AVE.				
			٤	City MIAMI		. FL	Zip Code 33133	
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 Signature/typeodor project harne of registered agent and title if applicable.								
FEE IS \$50.00								
		Make Check Paya	DUE BY		nt of State			
9.	MANAGING MEME	BERS/MANAGERS	DOE	MAI I	<u>··</u> · · · · · · · · · · · · · · · · · ·			
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11. I hereby o	certify that the information supplied wi	th this filing does not qualify	for the even	ontion stated in Sec	ction 119 07(3)(i) Florida Statutes I	further certify th	nat the information	

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

vintero. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #