FILED

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90248 045 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L28517

1. Corporation Name

CREATIVE MUSIC, INC.

Principal Place	e of Business	Mailing Address				1997)		EBSS TOBS DIDST W	Aft étaki nigit n	1811 B1814 1881
12955 SW 68 AVE MIAMI FL 33156		12955 SW 68 AVE MIAMI FL 33156				DO NOT WR	ITE IN THIS	SPACE		
บร		US				3. Date Incorporat				
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number				olied For-
21	•	26				65-0176449)			Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of St	atus Desired		\$8.75 A	
22		27				J. Certificate of Oil			Fee Re	quired
City & Stat	e	City & State				6. Election Campa	-		\$5.00	
23		28				Trust Fund Cor			Added to	Fees
Zip	Country	Zip	Coun	iry		8. This corporation		rent year int		□No
24	9. Name and Address of Currer		30			Personal Prope 10. Name and Add		Registered		
	9. Name and Address of Currer	it Registered Agent		Name				. 1	- gent	
JARA	AMILLO, DARIO L.			DV			<u> የ</u> ቤት <u>ነ</u> ነ	1110		
12955 SW 68 AVE			4	Street	Addres	s (P.O. Box Number	r is Not Accept	ههارك لا	_	i
	W FL 33156			33		<u> </u>		1		
						ami		FL	85 Zip 9	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	s, the ab	ve-named	corpor	ation submits this sta	atement for the	purpose of	changing its	registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was aut itions of, Section 607,0505, Florid	inorizea i da Statut	oy the corpo es.	oration	s board of directors.	. I nereby acce	bt me abbon	milein as ref	JISTOFOL
SIGNATURE										
SIGNATORE	Signature, typed or printed name of registered age	nt and title if applicable (NOTE. F		gent signature r	required w	vhen reinstating)		DATE		
12.		ID DIRECTORS	13.		75	DDITIONS/CH			Change	Addition
TITLE	PSD	DELETÉ	1.1 TITL		D	ario L	UA C	-6Mil/	Change	☐ Addidoii
NAME	JARAMILLO, DARIO L.		1.2 NAA		5	772 54	- ۲۲ د	TER	,	
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CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITL		1				Change	Addition
NAME		<u></u>	5.2 NAN		ł	19 35 4 4	Mark Strain	ه در میزود به داد. اماری عامل		
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CITY-ST-ZIP				-ST-ZIP		FRE YEST THE ST	2.52.71.81357.45			
TITLE	,	☐ DELETE	6.1 TITL						Change	Addition
NAME			6.2 NAM	ΙE					-	
	i			EET ADDRESS	I	÷				,

14. I hereby certify that the information supplied with this filing does 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, with all other the empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP