

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

FILED

Apr 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #

1. Corporation Name

M 52474
Caribbean Music Festival

Principal Place of Business

Mailing Address

8341 N.W. 11 Street
Pembroke Pines Florida 33024

3. Date Incorporated or Qualified

3a. Date of Last Report

May 21, 97

4. FEI Number

592406437

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

2. Principal Place of Business

21 8341 N.W. 11 St

22 Suite, Apt. #, etc.
Pembroke Pines

23 City & State
Fla, 33024

24 Zip
33024

25 Country
Broward

2a. Mailing Address

26 8341 N.W. 11 St

27 Suite, Apt. #, etc.

28 City & State
Pembroke Pines

29 Zip
Fl, 33024

30 Country
Broward

9. Name and Address of Current Registered Agent

Elgeta Thompson
8341 N.W. 11 Street
Pembroke Pines Fl. 33024

10. Name and Address of New Registered Agent

81 Name Elgeta Thompson
82 Street Address (P.O. Box Number is Not Acceptable)
8341 N.W. 11 Street
83 Pembroke Pines
84 City
FL 85 Zip Code
33024

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
officer 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, and agree to, with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Elgeta Thompson

Signature of current registered agent and file if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE Mar. 25-97

12. OFFICERS AND DIRECTORS

11 TITLE ☐ DELETE
NAME Director
STREET ADDRESS Elgeta Thompson
CITY-ST-ZIP 8341 N.W. 11 St
Pembroke Pines Fl, 33024
12 NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

13 TITLE ☐ DELETE
NAME Director
STREET ADDRESS Elgeta Thompson
CITY-ST-ZIP 8341 N.W. 11 St, P. Pines Fl, 33024
14 NAME ☐ DELETE
STREET ADDRESS
CITY-ST-ZIP

15 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

16 TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP
21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do 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.

SIGNATURE:

Elgeta Thompson Director
Elgeta Thompson Director

March 25-97

Date

Day-time Phone #

CR2E034 (9/96)