## 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 #

1. Corporation Name

M85982

COCONUT GROVE RECORDING COMPANY, INC.

APPROVED AND FULLO

D97 AUS 12 AM II: 00

SECUCIARY OF STATE VALLARASSEL, FLORIDA

COCONOT GROWN ANDONDERS CONTINUE VEHICLE									
Principal Place	o of Rusiness	Mailing Address	<u> </u>						
940 Lincoln Road 940 Lincoln Ro			heo!	Sui to	308				
Suite 3	=	Miami Beach,	-		139				
	Beach, Florida	mumi neuch,		uu 55		· · · · · · · · · · · · · · · · · · ·	<b>,</b>		
33139						3. Date Incorporated or Qualified 3a. Date of Last Report			port :
A Dimensi Di		On Halling Address			4. FEI N	7/88	6/24/9		
2. Principal Place of Business 2a. Mailing Address						umber 283179		<u> </u>	plied For
Suite, Apt	Suite, Apt #, etc.	etc			* * * * * * * * * * * * * * * * * * *	<u> </u>	8.75 A	t Applicable	
22 27					5. Certife	cate of Status Desired	K 3	Fee Rec	
City & State City & State			-		6. Election	on Campaign Financing		\$5.00	<del>`</del>
23	28					Fund Contribution		Added to	• • •
Ζιρ	Country Zip			Country 8. This corporation has liability for int				under s.	199.032.
24	25 29 30				Florid	a Statutes	Yes 🗀 N	10	
	9. Name and Address of Currer	I Registered Agent		-1	10. Name	e and Address of New Re	gistered Age	nt	
			8		Pan Cour	telis			
Pan Courtelis				2 Street A	Address (P.O. Bo	x Number is Not Acceptab	le)		
3612 Bayview Road					701 Briel	kell Avenue, S	uite 14	00	
	conut Grove, floris	6	3						
	\ \K\rap{\pi}		6				<b>_</b>   6	5 Zip C	
		A			Miami		<u> </u>	331	
office or re	to the provisions of/sections/607.05), egistered agent, of both, in the State	of Fibrida. Such change was a	s, the about hithorized to	ve-named to by the corp	corporation subn oration's board o	nits this statement for the p of directors. I hereby accep	urpose/of cha If the appoint	anging its ment as r	registered registered
11. Pursuant to the provisions of Sections 607.05b) and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, of both, in the State of Fibrida. 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	Signatural typed or printed name of registered age	required when reinslatin	-01	11117					
12.		D DIRECTORS	13.	gent signature r		IONS/CHANGES TO OFFIC	ERS AND DI	RECTORS	S IN 12
TITLE	DPS	DELETE	1.1 TITLE					Change	Addition
NAME	Pan Courtelis		1.2 NAME	:	Preside	<del>-</del>			
STREET ADDRESS				ET ADDRESS	Pan Courtelis				
CITY-ST-ZIP	2980 Mafarlane Road, Suite 211 Coconut Grove, Florida 33133			940 Lincoln Road, Suite 308 -SI-ZIP Miami, Florida 33139					
TITLE	☐ DELETE		21 TITLE		Secretary			Change	Addition
NAME			2 2 NAME	:	Pan Cou	rtelis			
STREET ADDRESS			2 3 STRE	ET ADDRESS	940 Lincoln Road, Suite 308				
CITY-ST-ZIP				-ST-ZIP	Miami, Florida 33139				
TITLE		☐ DELETE	3 1 TITLE	i i	Xice Pr	esident/Treasu	rer K	Change	Addition
NAME			3 2 NAME		Nathanie				
STREET ADDRESS				ET ADDRESS	240_Line	oln Road, Suit ach, Florida	9,398		
CITY-ST-ZIP		☐ DELETE	34 CITY		MIAMI DE	acii, Floriua		Channa	Addition
TITLE NAME		F DECENT	4 1 TITLE 4 2 NAM	1				Change	
STREET ADDRESS				ET ADDRESS		<b>4000022</b> -08/12/9		44-	U
CITY-ST-ZIP			4.4 City	i		~08/12/3	] (U] U	19U. *********U.	diam
TITLE		DELETE	5 t TITLE			****558		Change	Addition
NAME			5 2 NAME	ł				Bo	, , , ,
STREET ADDRESS				ET ADDRESS					
City -ST - ZIP			5.4 CITY -	- 1					
TITLE		☐ DELETE	61 TITLE	<del></del>				Change	Addition
NAME			62 NAME	:			<del></del>	ACA	$\langle \mathcal{M} \rangle$
STREET ADDRESS			63 STHE	T ADDRESS			•	~~~	211
CITY-ST-7IP			6.4 City	ST - 7IP				一分だ	121
14. I do heret.	by certify that the information supplie	d with this filing does not qualify	y for the ex	emplion sta	ated in Section 1	19.07(3)(i). Florida Statute	s. I further ce	rtify that th	he

information indicated on this annual report or supplemental annual topolitis frue and accurate and that my signature shall have the same legal effect as if made under oath; that an an officer or biroctor of this corporation or the receiver or trustee employeered 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:

305-531-6080

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