

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009921

FILED  
Feb 24, 2008  
Secretary of State

**Entity Name:** TROJAN MUSIC BOOSTERS CORPORATION

**Current Principal Place of Business:**

6870 MIAMI LAKES DR.  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

1640 WEST 72 STREET  
HIALEAH, FL 33014

**Current Mailing Address:**

6870 MIAMI LAKES DR.  
MIAMI LAKES, FL 33014

**New Mailing Address:**

1640 WEST 72 STREET.  
HIALEAH, FL 33014

**FEI Number:** 20-3560306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BARON, BARBARA H MRS  
6870 MIAMI LAKES DR.  
MIAMI LAKES, FL 33014 US

**Name and Address of New Registered Agent:**

REY, KATHERINE M MS  
1640 WEST 72 STREET  
HIALEAH, FL 33014 US

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.

SIGNATURE: KATHERINE M REY

02/24/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BARON, BARBARA H MRS  
Address: 6870 MIAMI LAKES DR.  
City-St-Zip: MIAMI LAKES, FL 33014

Title: T ( ) Delete  
Name: MELENDEZ, OMAR  
Address: 6541 W. 14TH AVE  
City-St-Zip: HIALEAH, FL 33012

Title: D ( ) Delete  
Name: MELENDEZ, LUISA  
Address: 6541 W. 14TH AVE  
City-St-Zip: HIALEAH, FL 33012

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: ALICEA, ZAIDA MS  
Address: 1300 WEST 53RD STREET, APT. 33  
City-St-Zip: HIALEAH, FL 33012

Title: T (X) Change ( ) Addition  
Name: REY, KATHERINE M MS  
Address: 1640 WEST 72 STREET  
City-St-Zip: HIALEAH, FL 33014

Title: VP (X) Change ( ) Addition  
Name: HOLGUIN, JEAN J MR.  
Address: 1855 W 60TH STREET, APT. 413  
City-St-Zip: HIALEAH, FL 33012

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATHERINE M REY

T

02/24/2008

Electronic Signature of Signing Officer or Director

Date