FILE NOW: FILING FEE IS \$61.25

CHECKS #

NONPROFIT CORPORATION ANNUAL REPORT

1998

**SIGNATURE:** 



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9400000400 (1)

## FILED Apr 10 1998 8:00am Secretary of State

THE LA	NGUAGE OF ART & MUS	SIC CORP.	( )								
Principal Place	e of Business	Mailing Ad	ddress				1	i oddiniok oku odili bildi dolih dolih bil			FALL COLL ISON
21000 NE 28TH SUITE 214 AVENTURA FL 3	•	SUITE 214	21000 NE 28TH AVENUE SUITE 214 AVENTURA FL 33180				3. Date Incorporated or Qualified 01/27/1994 4. FEI Number				oplied For
2. Principal P	ace of Business	2e. Mailing	Address				╁╴	65-0462292		\$8.75	t Applicable
21		26					Ь.	Certificate of Status Desired		Fee Re	
Suite, Apt. #, etc.		— — · · · · ·	Suite, Apt. #, etc.				6.	Election Campaign Financing		\$5.00 N	
City & State		· <del></del>	City & State				17.	Trust Fund Contribution  Is this nonprofit corporation a hor		Added to	
23		28	28				``	· · · · · · · · · · · · · · · · · · ·		No	
Zip	Country	Zip		Ь.	untry		8.	This corporation owes or has pale	_		
24	9. Name and Address of Curi	29  rent Registered A	nent	30	1		10	Personal Property Tax due June : Name and Address of New Reg			No
	OF ITEMPORAL PROPERTY OF COLUMN	ent megiatered A	Anur		81	Name		Hallio and Address of Hen Hey	ineranan wi	<del>,0111</del>	
SMOLEY.	ROBERT A (ESQ)				93	Ctroot Addre	(E	O Boy Number is Not Assentable			
21000 NE 28TH AVENUE				82 Street Addr			955 (r	P.O. Box Number is Not Acceptable	<b>e</b> )		
SUITE 21	14				83						
AVENTU	RA FL 33180 🗥				84	City				85 Zip (	Code
11. Pursuant	In the provisions of Sections 617 (	502 and 617 1508	Floride Stelut	os the e	bove	named corne	oratio	on submits this statement for the pu	FL.	benoing it	e registered
office or re	egistered agent, or both, in the Sta	ate of Florida, Such	change was a	authorize	d by	the corporation	on's t	n submits this statement for the pu board of directors. I hereby accep	the appoi	ntment as	registered
SIGNATURE	Trialina trial, and assopt the co	nganomo or, coomo	11 0 11 .0000, 11	Jilda Ola		•					
	Signature, typed or printed name of registered		le. (NOT		d Ager	nt signature require			DATE		
12.		ND DIRECTORS	DELETE	13.				ADDITIONS/CHANGES TO OFFICE			
YITLE NAME	PSD Lasry, Richard		□ beceit	1.1 T 1.2 N					L	Change	☐ Addition
STREET ADDRESS	21000 NE 28TH AVENUE, S	HITE 214				ADDRESS					
CITY-ST-ZIP	AVENTURA FL 33180	OIIC 214			TY-ST						
TITLE	D		DELETE	2.1 T						Change	Addition
NAME	LASRY, PASCAL			2.2 N	IAME						
STREET ADDRESS	21000 NE 28TH AVENUE, S	TE 214		2.3 \$	TREET	address					
CITY-ST-ZIP	AVNETURA FL				2-YIK	T-ZIP					
TITLE	D		DELETE	3.1 T					L	_ Change	Addition
NAME STREET ADDRESS	LASRY, JOHN	TE 214		3.2 N		*DDDCCC					
•	21000 NE 28TH AVENUE, S AVENTURA FL	IC 214			CITY - S	ADDRESS					
CITY-ST-ZIP TITLE	D		DELETE	3.4. U		1-21				Change	Addition
NAME	LASRY, DANNY				NAME						_
STREET ADDRESS	21000 NE 28TH AVENUE, S	TE 214		4.3 S	TREET	ADORESS					
CITY-ST-ZIP	AVENTURA FL			4.4 C	ITY-ST	r - ZIP					
TITLE			☐ DELETE	5.1 T	ITLE				Ľ	Change	Addition
NAME				5.2 N							
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP TITLE			DELETE	5.4 C 6.1 T	ITY-ST	I-ZIP				Change	Addition
NAME				6.2 N					_	⊒ ∧uango	Last Publiculi
STREET ADDRESS						address					
CITY-ST-ZIP					ITY-ST						
14. Thereby o	ertify that the information supplied	with this filing do	es not qualify for	or the ex	empt	lon stated in S	Section	on 119.07(3)(i), Florida Statutes. I f	urther cert	fy that the	Information
officer or Block 12	on this annual report of exampleme director of the corporation of the r or Block 13 if changed or on an a	inal annual report eceiver or trustee ( Itachment with an	empowered to address.	execute	this f	a my signaturi eport as requi	e sna ired l	all have the same legal effect as if by Chapter 617, Florida Statutes; e	made unde ind that my	ii oath; tha r name app	pears in