

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # N97000001986

1. Entity Name
CONTEMPORARY MUSIC COOPERATIVE CORP.



Principal Place of Business
P.O. BOX 833142
MIAMI, FL 33283-3142

Mailing Address
P.O. BOX 833142
MIAMI, FL 33283-3142

DO NOT WRITE IN THIS SPACE



03222005 No Chg-NP CR2E037 (10/03)

4. FEI Number
65-0783684

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CUTRERA, ANTHONY
8349 SW 107 AVE
APT. B
MIAMI, FL 33173

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution.. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	CUTRERA, ANTHONY
STREET ADDRESS	14390 SW 98 TERR
CITY-ST-ZIP	MIAMI, FL 33186
TITLE	V
NAME	BILLINGTON, ROBERT
STREET ADDRESS	P.O. BOX 833142 (N/A)
CITY-ST-ZIP	MIAMI, FL 332833142
TITLE	S
NAME	LETONA, MARIA
STREET ADDRESS	P.O. BOX 833142 (N/A)
CITY-ST-ZIP	MIAMI, FL 332833142
TITLE	D
NAME	KAM, DENNIS
STREET ADDRESS	UNIVERSITY OF MIAMI SCHOOL OF MUSIC
CITY-ST-ZIP	CORAL GABLES, FL 33124
TITLE	D
NAME	FLOYD, J. B. DR.
STREET ADDRESS	4841 S.W. 64 CT.
CITY-ST-ZIP	MIAMI, FL 33155
TITLE	D
NAME	ACEBO, MANUEL
STREET ADDRESS	7384 S.W. 80 STREET, APT. #25
CITY-ST-ZIP	MIAMI, FL 33143

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04/20/05-80067-011 61.25

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12. 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Anthony Cutrera
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/05 (305) 6303564
Date Daytime Phone #