2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000028710 **DOCUMENT #**

1. Entity Name

FLAMINGO MUSIC ENTERTAINMENT, INC.

FILED Mar 06, 2003 8:00 am § Secretary of State

03-06-2003 90118 034 ***150.00

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		ce of Busines 2 AVE UNIT 1 122		3100	ng Address N.W. 72 AVE., UNIT AI FL 33122	129						
City & State Country Top Country Top Country Top Country Top Country Top So Certificate of Status Desired Street Address of New Registered Agent Name Name Name Name Street Address (P.O. Box Number is Not Acceptable) City FL Zin Coule City Top City City Top City Top City Top City City City City Top City Cit	2. Principal (Place of Busin	ness	3. Ma	3. Mailing Address					 		(1111 38 11 1 78 1
Zip Country Zip Country Sip Country S. Certificate of Stehs Desired Against Street Address (F.O. Box Number's Not Acceptable) City FL Zip Code	Suite, Apt	. #, etc.		Sui	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
See Name and Address of Current Registered Agent See Name and Address of Now Registered Agent	City & Sta	te	<u>-</u>	City	City & State			4.	FEI Number 65-100048	7		·
JURE, JORGE 3100 N.W. 72 AVE., UNIT 129 MIAMI FL 33122 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. I am familiar with, and accident the obligations of registered agent and the registered agent agent produced when receding to the purpose of changing its registered agent, or both, in the State of Fiorida. I am familiar with and accident produced agent agent agent agent agent produced	Zip		Country	Zip	Zip Country			5.	Certificate of Status Desired		\$8.75 Ad	ditional
Name		6. Name	and Address of Currer	t Register	Registered Agent			7.	Name and Address of New	Registered A	gent	
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. If am familiar with, and according to the obligations of registered agent	3100 N.W	1. 72 AVE., l	JNIT 129				Name					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. I am familiar with, and acc the obligations of registered agent. Signature Spreader Spreade	MIAMI FL	33122					City		7	EI	Zip Cod	e
Signature reculted when minimated ing) DATE	8. The above the obligation	named entity tions of registe	submits this statement ered agent.	for the purp	oose of changing its	registered	d office or	registered ac	gent, or both, in the State of F		amiliar with,	and accept
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10.	SIGNATURE	Signature, typed	or printed name of registered age	nt and title if app	blicable. (NOTE	: Registered	Agent signatu	ire required when r	reinstating)	DATE		
TITLE NAME STREET ADDRESS OCTY-ST-ZIP TITLE NAME STREET ADDRESS OCTY-S	Afte	r May 1, 200	3 Fee will be \$550.00) of State		***						
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	10.		OFFICERS ANI	DIRECTO	RS	11.		ΑĹ	DDITIONS/CHANGES TO OF	FICERS AND	DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS ST	NAME Street address	JURE, JOR 3100 N.W.	72 AVE., UNIT 129		☐ Delete	NAME STREET						Addition
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to not grainly to the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information urate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the tris report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if we proposed. indicated on this report or supplemental report is true and acoust of the corporation or the receiver or trustee empowered to export changed, or on an attachment with an address, with all the rike

SIGNATURE: