

Apr 29 03 12:06p

Donna Holman

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06-16-2003 90355 001 ***750.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUN 20 PM 4:26

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000028887

1. Entity Name
CORAL GABLES MUSIC CORP.

55048361

Principal Place of Business 1638 S BAYSHORE CT 301 COCONUT GROVE, FL 33133		Mailing Address 1638 S BAYSHORE CT 301 COCONUT GROVE, FL 33133	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 85-1013275		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOLMAN, DONNA 1638 S BAYSHORE CT #301 COCONUT GROVE, FL 33133			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
A. 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 _____ DATE _____ Signature must be printed name of registered agent and the 1st signature. (NOTE: Registered Agent's name should appear in Block 6.)			
B. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fee	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JESTER, CHRISTOPHER 1638 S BAYSHORE CT #301 MIAMI, FL 33133 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST JESTER, DENISE 1638 S BAYSHORE CT #301 MIAMI, FL 33133 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 607, 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 the are powered.			
SIGNATURE: <u>Christopher W. Jester</u>		4-29-2003 305668-9100	

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