

2001 UNIFORM BUSINESS REPORT (UBR)

3/2/0

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-02-2001 90069 033 ***150.00

DOCUMENT # P00000042631

1. Entity Name
MUSIC STAR INTERNATIONAL PRODUCTIONS, INC.

Principal Place of Business
**290 SW 165TH STREET, PLAZA 100
MIAMI FL 33169**

Mailing Address
**290 SW 165TH STREET, PLAZA 100
MIAMI FL 33169**

2. Principal Place of Business
AGGA NW 97 PL
Suite, Apt. #, etc.

3. Mailing Address
AGGA NW 97 PL
Suite, Apt. #, etc.

City & State
MIAMI FL
Zip
33178
Country
USA

City & State
MIAMI FL
Zip
33178
Country
USA

4. FEI Number
65-1003058
Applied For
☐ Not Applicable

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

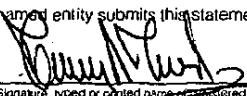
6. Name and Address of Current Registered Agent

**FELDENKRAIS, MICHAEL
290 SW 165TH STREET, PLAZA 100
MIAMI FL 33169**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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.

SIGNATURE  **2-26-2001**
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PRESIDENT	LEOPOLDO BETANCOURT			<input type="checkbox"/>
VICE PRESIDENT	YUMAR R. MENDEZ			<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
	AGGA NW 97 PL.		MIAMI FL 33178 U.S.A.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	AGGA NW 97 PL.		MIAMI FL 33178 U.S.A.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-2001 (305) 573-7383
Date Daytime Phone #

CR2E034 (10/00)