

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000061665

FILED
Apr 29, 2004
Secretary of State

Entity Name: TROPICAL CARIBE MUSIC, INC.

Current Principal Place of Business:

10556NW 26TH STREET
D-101
MIAMI, FL 33172

New Principal Place of Business:

10440 NW 37 TERRACE
MIAMI, FL 33178

Current Mailing Address:

9410 SW 42ST
MIAMI, FL 33165

New Mailing Address:

FEI Number: 65-1018753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MESA, IDALMIS
9410 SW 42ND STREET
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: IDALUIS, MESA
Address: 9410 SW 42 STE., STE F-104
City-St-Zip: MIAMI, FL 33165

Title: VD () Delete
Name: YEC, ALFONSO A
Address: 5359 NW 106TH COURT
City-St-Zip: MIAMI, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: IDALMIS, MESA
Address: 9410 SW 42 STE., STE F-104
City-St-Zip: MIAMI, FL 33165

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALFONSO A. YEC

VD

04/29/2004

Electronic Signature of Signing Officer or Director

Date