FOR PROFIT CORPORATION

FILED Apr 03, 2003 8:00 am Secretary of State

UNIFORM BUSINESS REPORT (UBR)				04-03-2003 90109 035 ***158.75	
1. Entity Nan	MENT # POZOOO9 RMELON MUSIC	1			
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	DU NOI WKIJE		AUE		
2. Principal Place of Business 11180 SW 107 ST 11180 SW		07 ST		∵ ``	
Suite, Apt. #, etc. SUIT6 313		Suite, Apt. #, etc. SUITE 313		DO NOT WRITE IN THIS SPACE	
City & State MIAMI, FL		City & State MIAMI, FL		4. FEI Number 16-1624123	Applied For
Zip	Country	Zip 33(36	country USA	5. Certificate of Status Desired	\$8.75 Additional
3317		1 22/40		7. Name and Address of Current Registe	Fee Required
	DO NOT W		Name Spi		P.A
DO NOT WRITE				s (P.O. Box Number Is Not Acceptable) SW 22 STREET	
IN THIS SPACE 4th Floor					
City MIAMI				ui F	L 33845
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 lifte if applicable. (NOTE: Registered Agent signature required when reinstating) DATE January 1: - May 1: Fee is: \$150.00 - 2.5 - 2.5					
After May 1, Fee is \$550.00 Amended UBR is \$61.25				Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
	Payable to Florida Department of		0.00 Car Sept. 20.10 St. 10 N. 10	A CALLS THE STATE SERVICE STATE OF THE STATE	Added to 1 ees
TITLE	P/D -		Time State of the		A second
NAME STREET ADDRESS	JOSE WIS GALVIS	~ 717	NAME STREET ADDRESS		
CITY-ST-ZIP	JOSE WIS GALVIS 11180 SW 107 ST SOF MIAMI, FL 33176	ie 313	CRY-ST-ZIP	A CONTRACTOR OF THE STREET OF	
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CITY-ST-ZIP TITLE		· · · · · · · · · · · · · · · · · · ·	SULL STATE		
NAME			NAME		
STREET ADDRESS					

12. Thereby certify that the information adoptied 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 reference empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address with all other like empowered.

SIGNATURE:

D TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR