2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000011019

Entity Name: LETRA Y MUSICA STUDIOS. INC.

FILED May 02, 2005 Secretary of State

| Littly Hai | iie. LLINA i | WOSICA STODIOS, INC. | | | | |
|---|---|---|----------------|--|--|--|
| Current Principal Place of Business: | | | | New Principal Place of Business: | | |
| 1942 N.E. 149 ST. NORTH MIAMI, FL 33181 | | | | 1942 N.E. 149 ST NORTH MIAMI, FL 33181 | | |
| Current Mailing Address: | | | | New Mailing Address: | | |
| 1942 N.E. 149 ST. NORTH MIAMI, FL 33181 | | | | 7320 OLD CUTLER ROAD CORAL GABLES, FL 33143 | | |
| FEI Number: | 11-3687785 | FEI Number Applied For() | FEI Num | ber Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | | Name and Address of New Registered Agent: | | |
| 7320 OLD CORAL GA The above | RAMON R CUTER ROAD ABLES, FL 33 named entity se of Florida. | 143 US | e purpose of | changing its register | red office or registered agent, or both, | |
| SIGNATUF | RE: | | | | | |
| Electronic Signature of Registered Agent | | | | | Date | |
| | | 3(2)(b), F.S., the corporation did Trust Fund Contribution (). | not receive th | e prior notice. | | |
| OFFICERS AND DIRECTORS: | | | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | DP () DE CIRIA, RAM 7320 OLD CUT CORAL GABLE | ER ROAD | | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | DV () SARMIENTO, L 5600 COLLINS MIAMI BEACH, | AVE. APT. 7 | | Title: Name: Address: City-St-Zip: | () Change () Addition | |

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: RAMON ROBERTO DE CIRIA DP 05/02/2005