## 2006 FOR PROFIT CORPORATION ANNUAL REPORT



FILED Aug 15, 2006 8:00 am Secretary of State

| 1. Entity Name DISC JOCKEY SERVICES, INC.  |   |  |  |                                 |  |                                       | 07-17-2006                                 | 5 901 44                     | 013 ***1                        | 50.00                       |  |
|--|---|--|--|---------------------------------|--|---------------------------------------|--|------------------------------|---------------------------------|-----------------------------|--|
| Principal Place of Business<br>8275 NW 186 ST #805<br>HIALEAH, FL 33015  |   |  | Mailing Address<br>8275 NW 186 ST #8<br>HIALEAH, FL 33015  | 8275 NW 186 ST #805             |  |                                       | 66023107                                   |                              |                                 |                             |  |
| Principal Place of Business  |   |  | 3. Mailing Address   |                                 |  |                                       |  |                              |                                 |                             |  |
| Suite, Apt. #, etc.  |   |  | Suite, Apt. #, etc.  |                                 |  | 07052006                              | Chg-P                                      | CR2E                         | 34 (11/05)                      |                             |  |
| City & State   |   |  | City & State   | <u> </u>                        |  | 20 -                                  | 23785                                      | 45                           | <b>→</b>                        | optied For<br>at Applicable |  |
| Zip  |   | Country  | Zíp  | Cour                            | ntry   | <u> </u>                              | of Status Desired                          |                              | \$8.75 Add<br>Fee Require       |                             |  |
| 6. Name and Address of Current Registered Agent  |   |  |  |                                 | 7. Name and Address of New Registered Agent Name |                                       |  |                              |                                 |                             |  |
| SIERRA, IS<br>8275 NW 1  | 186ST                                       |  |  | Street                          |  |                                       | ess (P.O. Box Number is Not Acceptable)    |                              |                                 |                             |  |
| 805<br>  HIALEAH,  | FL 3301                                     | 5 ;  |  |                                 |  |                                       |  |                              |                                 |                             |  |
| n.   |   |  |  |                                 | City   |                                       |  | FL                           | Zip Cod                         | е                           |  |
| 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 15.  Signature, typed or printed name p. registered agent and tate if applicable. (INOTE: Registered Agent approache when reinstating)  DATE   |   |  |  |                                 |  |                                       |  |                              |                                 |                             |  |
|  | 30,300,1700                                 | 2.5  |  |                                 |  |                                       |  | <b>DATE</b>                  | <del></del>                     |                             |  |
|  |   | 7 (4) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1   | 9. Election Camp<br>Trust Fund Cor   |                                 |  | i.00 May Be<br>ded to Fees            |  |                              |                                 | ļ                           |  |
| 10.  |   |  | ND DIRECTORS   | 11.                             |  | ADDITIONS                             | CHANGES TO OFF                             | ICERS AND                    | DIRECTORS                       | S IN 11                     |  |
| TITLE<br>NAME  | P<br>SIERRA,                                | ISAAC E  | Delete TITLE   |                                 | l l  |                                       |  |                              | Change                          | Addition                    |  |
| STREET ADORESS   | 8275 NW                                     | 186ST #805   |  |                                 | EET ADDRESS                                      |                                       |  |                              |                                 |                             |  |
| CITY-SI-ZIP  | HIALEAH<br>VP                               | , FL 33015   | CITY Delete HITE   |                                 | r-SI-ZIP   | -                                     |  |                              | ☐ Change                        | Addition                    |  |
| NAME   | SIERRA, YAMIRA F                            |  | La Delete  | NAME NAME                       |  |                                       |  |                              | Change                          |                             |  |
| STREET ADDRESS<br>CITY-ST-ZIP  | SS 8275 NW 186 ST #805<br>HIALEAH, FL 33015 |  |  |                                 | EET ADORESS<br>Y-ST-ZP                           |                                       |  |                              |                                 |                             |  |
| TITLE  | HIALEAN                                     | 1, FL 33013  | Delete   | 1171                            | <del></del>                                      |                                       |  |                              | ☐ Change                        | ☐ Addition                  |  |
| HAME   | ]   |  |  | NAM                             | - 1  |                                       |  |                              |                                 | . 1                         |  |
| STREET ADDRESS CITY-S1-ZIP   | ]   |  |  |                                 | EET ADORESS<br>(+51+7)P                          |                                       |  |                              |                                 |                             |  |
| TITLE  |   |  | ☐ Defete   | THTL                            | £  |                                       |  |                              | Change                          | Addition                    |  |
| NAME<br>STREET ADDRESS   | ļ   |  |  | NAM<br>STRI                     | Æ<br>EET ADDRESS                                 |                                       |  |                              |                                 |                             |  |
| CITY-ST-ZIP  |   |  |  |                                 | r-ST-ZIP   |                                       |  |                              |                                 |                             |  |
| TITLE  |   | -  | Delete   | TITL                            |  |                                       |  |                              | ☐ Change                        | Addition                    |  |
| NAME<br>STREET ADDRESS   |   |  |  | STRI                            | EET ADORESS                                      |                                       |  |                              |                                 |                             |  |
| CITY-ST-ZIP  |   |  |  | ст                              | r·ST·ZIP   |                                       |  |                              |                                 |                             |  |
| TITLE<br>NAME  |   |  | Ocicte   | TITL                            |  |                                       |  |                              | Change                          | Addition                    |  |
| STREET ADDRESS   |   |  |  | STR                             | EET ADDRESS<br>(-ST-ZP                           |                                       |  |                              |                                 |                             |  |
|  | certify that If                             | ne Information supplied v  | with this filing does not qualify<br>it is true and accurate and that                                  |                                 |  | d in Chapter 11                       | 9, Florida Statutes.                       | l lurther cer                | tify that the in                | nformation                  |  |
| indicated<br>of the cor<br>changed   | on this reportion or i                      | ort or supplemental report<br>the receiver or trustee en<br>tachment with an address | nt is true and accurate and that<br>impowered to execute this repo<br>is, with all other like empowere | t my signa<br>vt as requ<br>vd. | tture shalt have the<br>ired by Chapter 60       | same legal effe<br>7, Florida Statute | ot as it made under<br>es; and that my nam | oath; that i<br>wo appears i | am an officer<br>in Block 10 or | or director<br>Block 11 if  |  |
| SICNAT   | TUDE:                                       | house  | Fluera   |                                 |  |                                       | 6/88/                                      |                              |                                 |                             |  |

IGNA TURE AND TYPED OR FRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## ATTACHMENT

66023107

## DISC JOCKEY SERVICES, INC. 8275 NW 186 ST #805 HIALEAH FL 33015

June 18, 2006

Division of Corporations Annual Report Section P.O. Box 6327 Tallahassee, FL 32314

REF: DOCUMENT#. P0500025382

Dear Sir or Madam:

Please be advised that the above-mentioned corporation annual report was never received for timely submission.

Therefore, we are requesting that the delinquent fees be waived and that the corporation is allowed to submit a second annual report with the corresponding fee of \$ 150.00

Please advise.

Your cooperation is appreciated.

Sincerely,

Isaac E. Sierra