

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131065

FILED  
Apr 04, 2012  
Secretary of State

**Entity Name:** TRINIDAD MUSIC STORE, INC.

**Current Principal Place of Business:**

401 E OSCEOLA STREET  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

401 E OSCEOLA STREET  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 65-1262300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOOGE, HOWARD E JR  
401 E OSCEOLA STREET  
STUART, FL 34994 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: OCONNOR, LORRAINE  
Address: 24 FONDES AMANDES RD  
City-St-Zip: ST ANNS TRINIDAD WI, XX

Title: D  
Name: HEZEKIAH, ROSEMARY  
Address: 94 LA HORQUETTE RD  
City-St-Zip: GLENCOE TRINIDAD WI, XX

Title: D  
Name: GIBERT, JEAN M  
Address: 32 SECOND AVE  
City-St-Zip: CASCADE TRINIDAD WI, XX

Title: D  
Name: SALVATORI, ELIZABETH A  
Address: 649 ST LUCIE CRESCENT  
City-St-Zip: STUART, FL 34994

I hereby 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 all other like empowered.

SIGNATURE: LORRAINE O'CONNOR

P/D

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date