2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 23, 2006 8:00 am Secretary of State **DOCUMENT # P05000155586** 03-23-2006 90016 012 ***150.00 GENERICA MUSIC, INC. Principal Place of Business Mailing Address 955 NW 82 AVENUE #219 955 NW 82 AVENUE #219 50004865 MIAMI, FL-33126--MIAMI, FL -33128-2. Principal Place of Business 3. Mailing Address タンの らい 9201 SW 67 STREET 67 STREET Suite, Apt. #, etc. Suite, Apt. #, etc. 03162006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For FL FL 20-3941988 MIAMI MIA Not Applicable Zip 33173 Country Zip タろノスコ Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SERGIO ROHERO MISLE, CAROLINA A Street Address (P.O. Box Number is Not Acceptable 955 NW 82 ST #219 --MIAMI, FL-33126 City MI AMI Zip Code 3<u>3/</u> 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. 3/17/06 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$450.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE ☐ Change Addition TITLE ROMERO, SERGIO NAME NAME STREET ADDRESS 9201 SW 67TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33173 CITY-ST-7/P ☐ Delete ☐ Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Delete TITLE Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receiver or drustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 305) 33503W PRESIDENT SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

FILED

Daytime Phone