

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000097554

FILED  
Apr 18, 2012  
Secretary of State

**Entity Name:** FESTIVALES & MUSICAL PRODUCTIONS CORP

**Current Principal Place of Business:**

5255 COLLINS AVE  
SUITE # 8-B  
MIAMI BEACH, FL 33140

**New Principal Place of Business:**

**Current Mailing Address:**

5255 COLLINS AVE  
SUITE # 8-B  
MIAMI BEACH, FL 33140

**New Mailing Address:**

**FEI Number:** 27-4103613

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALONSO, MIRIAM  
5255 COLLINS AVE  
STE # 8-B  
MIAMI BEACH, FL 33140 US

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

ALONSO, MIRIAM  
5255 COLLINS AVE  
SUITE # 8-B  
MIAMI BEACH, FL 33140 US

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: MIRIAM ALONSO

04/18/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: ALONSO, MIRIAM  
Address: 5255 COLLINS AVE # 8-B  
City-St-Zip: MIAMI BEACH, FL 33140

Title: S  
Name: RUIZ, LINA S  
Address: 1022 NW 127 PATH  
City-St-Zip: MIAMI, FL 33182

Title: V  
Name: ALVAREZ, ELSIE  
Address: 5255 COLLINS AVE # 8-B  
City-St-Zip: MIAMI BEACH, FL 33140

Title: O  
Name: LLAPUR, ILEANA  
Address: 3400 SW 143TH CT  
City-St-Zip: MIAMI, FL 33175

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: MIRIAM ALONSO

DP

04/18/2012

Electronic Signature of Signing Officer or Director

Date