

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

93 APR 22 PM 1:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000017609 (7)

1. Corporation Name

CRESCENT MOON RECORDS, INC.



DO NOT WRITE IN THIS SPACE

|                                                                                                                              |                     |                                                                       |                     |
|------------------------------------------------------------------------------------------------------------------------------|---------------------|-----------------------------------------------------------------------|---------------------|
| Principal Place of Business<br>555 JEFFERSON AVENUE<br>MIAMI BEACH FL 33139<br>US                                            |                     | Mailing Address<br>555 JEFFERSON AVENUE<br>MIAMI BEACH FL 33139<br>US |                     |
| 2. Principal Place of Business                                                                                               |                     | 2a. Mailing Address                                                   |                     |
| 21                                                                                                                           | Suite, Apt. #, etc. | 26                                                                    | Suite, Apt. #, etc. |
| 22                                                                                                                           | City & State        | 27                                                                    | City & State        |
| 23                                                                                                                           | Zip                 | 28                                                                    | Country             |
| 24                                                                                                                           | Country             | 29                                                                    | Zip                 |
| 25                                                                                                                           | Country             | 30                                                                    | Country             |
| 9. Name and Address of Current Registered Agent<br>ESTEFAN ENTERPRISES, INC.<br>555 JEFFERSON AVENUE<br>MIAMI BEACH FL 33139 |                     |                                                                       |                     |
| 10. Name and Address of New Registered Agent                                                                                 |                     |                                                                       |                     |
| 81 Name                                                                                                                      |                     |                                                                       |                     |
| 82 Street Address (P.O. Box Number is Not Acceptable)                                                                        |                     |                                                                       |                     |
| 83                                                                                                                           |                     |                                                                       |                     |
| 84 City                                                                                                                      |                     |                                                                       |                     |
| 85 Zip Code                                                                                                                  |                     |                                                                       |                     |

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS |                    |                                            |  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                       |                                            |                                              |
|----------------------------|--------------------|--------------------------------------------|--|-------------------------------------------------------|-----------------------|--------------------------------------------|----------------------------------------------|
| TITLE                      | PD                 | <input checked="" type="checkbox"/> DELETE |  | 1.1 TITLE                                             | PD                    | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition            |
| NAME                       | ESTEFAN EMILIO JR. |                                            |  | 1.2 NAME                                              | Emilio Estefan, Jr.   |                                            |                                              |
| STREET ADDRESS             | 6205 BIRD RD.      |                                            |  | 1.3 STREET ADDRESS                                    | 555 Jefferson Avenue  |                                            |                                              |
| CITY-ST-ZIP                | MIAMI FL 33155     |                                            |  | 1.4 CITY-ST-ZIP                                       | Miami Beach, FL 33139 |                                            |                                              |
| TITLE                      | STD                | <input checked="" type="checkbox"/> DELETE |  | 2.1 TITLE                                             | VPSTD                 | <input checked="" type="checkbox"/> Change | <input type="checkbox"/> Addition            |
| NAME                       | ESTEFAN GLORIA M.  |                                            |  | 2.2 NAME                                              | Gloria M. Estefan     |                                            |                                              |
| STREET ADDRESS             | 6205 BIRD ROAD     |                                            |  | 2.3 STREET ADDRESS                                    | 555 Jefferson Avenue  |                                            |                                              |
| CITY-ST-ZIP                | MIAMI FL 33155     |                                            |  | 2.4 CITY-ST-ZIP                                       | Miami Beach, FL 33139 |                                            |                                              |
| TITLE                      | AS                 | <input checked="" type="checkbox"/> DELETE |  | 3.1 TITLE                                             | VP                    | <input type="checkbox"/> Change            | <input checked="" type="checkbox"/> Addition |
| NAME                       | FARJARD REBECCA    |                                            |  | 3.2 NAME                                              | Frank Amadeo          |                                            |                                              |
| STREET ADDRESS             | 6505 BIRD ROAD     |                                            |  | 3.3 STREET ADDRESS                                    | 555 Jefferson Avenue  |                                            |                                              |
| CITY-ST-ZIP                | MIAMI FL 33155     |                                            |  | 3.4 CITY-ST-ZIP                                       | Miami Beach, FL 33139 |                                            |                                              |
| TITLE                      | C                  | <input checked="" type="checkbox"/> DELETE |  | 4.1 TITLE                                             |                       | <input type="checkbox"/> Change            | <input type="checkbox"/> Addition            |
| NAME                       | HERNANDEZ LUIS F.  |                                            |  | 4.2 NAME                                              |                       |                                            |                                              |
| STREET ADDRESS             | 6205 BIRD ROAD     |                                            |  | 4.3 STREET ADDRESS                                    |                       |                                            |                                              |
| CITY-ST-ZIP                | MIAMI FL 33155     |                                            |  | 4.4 CITY-ST-ZIP                                       |                       |                                            |                                              |
| TITLE                      |                    | <input type="checkbox"/> DELETE            |  | 5.1 TITLE                                             |                       | <input type="checkbox"/> Change            | <input type="checkbox"/> Addition            |
| NAME                       |                    |                                            |  | 5.2 NAME                                              |                       |                                            |                                              |
| STREET ADDRESS             |                    |                                            |  | 5.3 STREET ADDRESS                                    |                       |                                            |                                              |
| CITY-ST-ZIP                |                    |                                            |  | 5.4 CITY-ST-ZIP                                       |                       |                                            |                                              |
| TITLE                      |                    | <input type="checkbox"/> DELETE            |  | 6.1 TITLE                                             |                       | <input type="checkbox"/> Change            | <input type="checkbox"/> Addition            |
| NAME                       |                    |                                            |  | 6.2 NAME                                              |                       |                                            |                                              |
| STREET ADDRESS             |                    |                                            |  | 6.3 STREET ADDRESS                                    |                       |                                            |                                              |
| CITY-ST-ZIP                |                    |                                            |  | 6.4 CITY-ST-ZIP                                       |                       |                                            |                                              |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_ 4/8/99

CR2E034 (10/97)