## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P93000019532

Entity Name: DEL ANGEL MUSIC, CORP.

FILED Mar 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place	of Business:
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6015 PINE TREE DRIVE 1501 COLLINS AVENUE

MIAMI BEACH, FL 33140 SUITE 207

MIAMI BEACH, FL 33139 US

**Current Mailing Address:** New Mailing Address:

1501 COLLINS AVENUE SUITE 207 6015 PINE TREE DRIVE MIAMI BEACH, FL 33140

MIAMI BEACH, FL 33139 US

FEI Number: 65-0394019 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CASTILLO, ALVARO B GARIBOTTI, PABLO N 1390 BRICKELL AVENUE 1501 COLLINS AVENUE SUITE 207 SUITE 200

CORAL GABLES, FL 33131 US MIAMI BEACH, FL 33139 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: PABLO N GARIBOTTI 03/27/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

GARIBOTTI, ADRIAN J GARIBOTTI, ADRIAN J Name: Name: 6015 PINE TREE DRIVE 1501 COLLINS AVENUE, SUITE 207 Address: Address:

City-St-Zip: MIAMI BEACH, FL 33140 City-St-Zip: MIAMI BEACH, FL 33139 US

( ) Delete Title: **VPSD** Title: VΡ (X) Change ( ) Addition

SALAZAR, CYNTHIA Name: Name: SALAZAR, CYNTHIA

6015 PINE TREE DRIVE 1501 COLLINS AVENUE, SUITE 207 Address: Address: MIAMI BEACH, FL 33140 MIAMI BEACH, FL 33139 US City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: ( ) Change (X) Addition

Name: GARIBOTTI, PABLO N Name:

1501 COLLINS AVENUE, SUITE 207 Address Address: City-St-Zip: City-St-Zip: MIAMI BEACH, FL 33139 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

VΡ SIGNATURE: PABLO N GARIBOTTI 03/27/2007