2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR P93000019532

1. Entity Name DEL ANGEL MUSIC, CORP.

Principal Place of Business 4353 ALTON ROAD MIAMI BEACH FL 33140

2. Principal Place of Business 5414 Pine

DOCUMENT #

Mailing Address 4353 ALTON ROAD MIAMI BEACH FL 33140

Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number City & State City & State Applied For 65-0394019 Miami Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CASTILLO, ALVARO B Street Address (P.O. Box Number is Not Acceptable) 1390 BRICKELL AVENUE SUITE 200 CORAL GABLES FL 33131 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE ■ Addition GARIBOTTI, ADRIAN J NAME NAME 4353 ALTON ROAD 5414 Pine tree Dr. STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33140 CITY-ST-ZIP Miami Beach, FL. 33140 CITY-ST-ZIP **VPSD** ☐ Delete TITLE Addition TITLE NAME Salazar, Cynthia NAME 5414 Pine tree Dr., 4353 ALTON ROAD STREET ADDRESS STREET ADDRESS MIAMI-BEACH-FL-33140 -- -- --Beach - FL - 33140 -CITY-ST-ZIP TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. 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 report or supplemental report at rue 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 entitle versus to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver or trustee entitle versus to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 in the corporation of the receiver of of t afrue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director evered 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 addre

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arian J. Garibotti 04/25/03

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May 01, 2003 8:00 am Secretary of State

05-01-2003 90822 028 ***150.00

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