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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Feb 24 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000031070 (3)

MASTER SOUNDS, INC.

SIGNATURE

Principal Place of Business 905 SOUTH BAYSHORE DRIVE SUITE 1931 MIAMI FL 33131 US		Mailing Address 905 SOUTH BAYSHORE D SUITE 1831	RIVE		3. Date Incorporated or Qualified 3a. Date of Last Report 02/01/1996			
		Miami FL 33131-2928 US						
	acc of Business	2a, Mailing Address	Mailing Address		4. FEI Number	4	Ap	plied For
21	AANING 11 (184) ANING PORTON AND ANIA ANIA ANIA ANIA ANIA ANIA ANIA	26			65-0484539			t Applicable
Suite, Apt. #, etc		 	Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A	
22]		City & State	City & State				Fee Re	
City & State 23)		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23 Zip	Country	Zip	Countr	v	8. This corporation has liability for	ntangihle ta		•
24	25 29 30							
	9. Name and Address of Curr		13-1		10. Name and Address of New Re	gistered Ag	ent	
PLAS	SENCIA, RAUL JR.		81	Name				
905 S BAYSHORE DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 1931								
MIA	VII FL 33131		83	1				
			B4	City			85 Zip (Code
				1 '		FL		
office or re	in the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was	authorized b	γ the corpora	poration submits this statement for the pation's board of directors. I hereby acceptions	or the appoin	nanging its ntment as	registered
SIGNATURE		0.00	r. D		food when a lambility	DATE		
12.	Signaturi Typen or priced ramp of registered of OFFICE RS A	ND DIRECTORS	13.	Jeur sildusinue uedr	uired when reinstailing) ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
12. TillE	PSTD	DELETE	1.1 TITLE		ADDITION OF THE OWNER OF THE		Change	Addition
NAMÉ	PLASENCIA, RAUL JR.		1.2 NAME	i i				
STREET ADDRESS	905 SOUTH BAYSHORE DR	VE. SUITE 1931		T ADDRESS				
Crty - ST - ZIP	MIAMI FL	··-, ····	1.4 CITY-					
TITLE		☐ DELETE	2.1 TITLE		<u> </u>	E	Change	Addition
NAME			2.2 NAME		1.5			
STREET ADDRESS			2.3 STREE	T ADDRESS				
CHY-SY-ZIP			2. 4 CITY	- \$T - ZIP				
TITLE		DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·			Change	Additio
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREE	ET ADDRESS	1.			
CITY-ST-ZIP			3.4. CITY	- ST - Z(P				
TITLE		☐ DELETE	4.1 TITLE			Ĺ.	Change	Additio
NAME			4. 2 NAM	E .				
\$1REEL ADORESS		•	4.3 STRE	ET ADDRESS	\ /			
CITY - S1 - 7/F		····	4.4 City-	ST-ZIP				·····
THLE		☐ DELETE	5.1 TITLE	1		L.	Change	Addition
NAME			5.2 NAME	1				
\$19EET ADDRESS		i i	5.3 STRE	ET ADORESS				
CITY-SI-ZIP		T	5.4 CITY			-	7 Change	1 44050
THUE		DELETE	6.1 TITLE			L	Change	Addition
NAME			6.2 NAMI		•			
STREET ADDRESS			1	ET ADDRESS				
CITY - ST - ZIP			6.4 CITY			- 11026 -		then
Informatio	w indicated on this annual report of	or supplemental annual report is or the receiver or trustee emon	true and act wered to exe	curate and the scute this rep	ed in Section 119.07(3)(1), Florida Statute at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as r	i made un	ider oath, th

RAULY ASENCIA JR