

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 AM 9:44

DOCUMENT # P94000043009 (7)

1. Corporation Name

RECORDING ARTISTS INTERNATIONAL PRODUCTIONS, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4937 SW 75TH AVENUE
MIAMI FL 33155

Mailing Address
4937 SW 75TH AVENUE
MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/06/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

21

26

65-0496728

Not Applicable

State, Apt. #, etc.

State, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

23

28

Trust Fund Contribution

☐

24

Country

29

Country

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LLOSA, JOSE L
14200 FARMER ROAD
MIAMI FL 33158

81 Name

JOSE L. LLOSA

82 Street Address (P.O. Box Number is Not Acceptable)

83 4937 S.W. 75 AV.

84 City

Miami

FL

85 Zip Code
33155

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

Jose R. Llosa

3/3/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PT
NAME	LLOSA, JOSE L
STREET ADDRESS	14200 FARMER ROAD
CITY, ST, ZIP	MIAMI FL 33158
TITLE	VSD
NAME	LLOSA, JENNY H
STREET ADDRESS	CALLE VICTOR LARCO HERRERA STE. 147
CITY, ST, ZIP	MIRAFLORES, LIMA PERU
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

1. TITLE	☐ Change ☐ Addition
1. NAME	
1. STREET ADDRESS	
1. CITY, ST, ZIP	
2. TITLE	☒ Change ☐ Addition
2. NAME	PSD
2. STREET ADDRESS	JENNY HIGGINSON
2. CITY, ST, ZIP	4937 S.W. 75 AV.
2. CITY, ST, ZIP	Miami, FL 33155
3. TITLE	☐ Change ☐ Addition
3. NAME	
3. STREET ADDRESS	
3. CITY, ST, ZIP	
4. TITLE	☐ Change ☐ Addition
4. NAME	
4. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
5. NAME	
5. STREET ADDRESS	
5. CITY, ST, ZIP	
6. TITLE	☐ Change ☐ Addition
6. NAME	
6. STREET ADDRESS	
6. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 191.07(6)(b), 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 treasurer or highest empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE:

Jenny Higginson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/20/95 (305) 382-6068