

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

APPROVED  
AND  
FILED

1997 AUG 12 AM 11:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                       |                                                                                   |                                                                                                           |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1997</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

**DOCUMENT #**

1. Corporation Name  
**P94000069891**  
**ALEXANDRIA MUSIC, INC.**

2. Principal Office Address  
**2980 MCFARLANE RD SUITE 211**  
**COCONUT GROVE, FL. 33133**

3. Mailing Address  
**2980 MCFARLANE RD #211**  
**COCONUT GROVE, FL. 33131**

3. Date incorporated in U.S.A. 3a. Date of last Report  
**09/22/1994** **04/28/1995**

|                                                                                                       |                                                                                         |                                                                                                                       |                                                                                                                                                                           |
|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 21. Principal Office Address<br><b>2980 MCFARLANE RD SUITE 211</b><br><b>COCONUT GROVE, FL. 33133</b> | 22. Mailing Address<br><b>2980 MCFARLANE RD #211</b><br><b>COCONUT GROVE, FL. 33131</b> | 4. FEI Number<br><b>65-0538017</b>                                                                                    | 5. Corporation Status<br><input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                        |
| 23. City & State<br><b>COCONUT GROVE, FL</b>                                                          | 24. City & State<br><b>COCONUT GROVE, FL</b>                                            | 6. Election Campaign Financing<br>Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> | 8. This corporation has an obligation to change its tax under the 1996 Florida Statutes <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> |

**9. Name and Address of Current Registered Agent**

**10. Name and Address of New Registered Agent**

**CT CORPORATION SYSTEM**  
**1200 S. PINE ISLAND RD.**  
**PLANTATION, FL 33324**

81. Name  
**PAN COURTELIS**

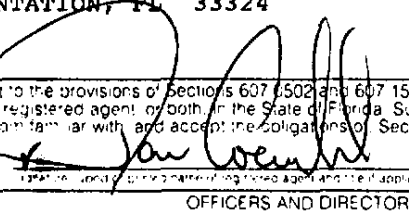
82. Street Address (P.O. Box Number is Not Acceptable)  
**701 BRICKELL AVENUE, SUITE 1400**

83. City  
**MIAMI, FLORIDA**

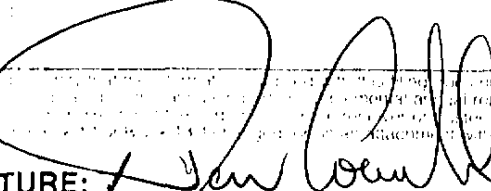
84. City  
**MIAMI, FLORIDA**

85. Zip Code  
**FL 33131**

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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE  **8/1/97**

| 12. OFFICERS AND DIRECTORS                            |                                            | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (N. 12)                            |                                                                         |
|-------------------------------------------------------|--------------------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| 1. TITLE<br><b>DPST</b>                               | <input checked="" type="checkbox"/> DELETE | 1.1 TITLE<br><b>DPST</b>                                                           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add |
| 2. NAME<br><b>COURTELIS, PAN</b>                      |                                            | 1.2 NAME<br><b>PAN COURTELIS</b>                                                   |                                                                         |
| 3. STREET ADDRESS<br><b>2890MCFARLANE RD. STE.211</b> |                                            | 1.3 STREET ADDRESS<br><b>701 BRICKELL AVENUE, SUITE 1400</b>                       |                                                                         |
| 4. CITY-STATE-ZIP<br><b>COCONUT GROVE, FL. 33133</b>  |                                            | 1.4 CITY-STATE-ZIP<br><b>MIAMI, FLORIDA 33131</b>                                  |                                                                         |
| 5. TITLE<br><input type="checkbox"/> DELETE           |                                            | 2.1 TITLE<br><input type="checkbox"/> Change <input type="checkbox"/> Add          |                                                                         |
| 6. NAME<br><input type="checkbox"/> DELETE            |                                            | 2.2 NAME<br><b>300002264543--3</b>                                                 |                                                                         |
| 7. STREET ADDRESS<br><input type="checkbox"/> DELETE  |                                            | 2.3 STREET ADDRESS<br><b>-08/12/97--01019--026</b>                                 |                                                                         |
| 8. CITY-STATE-ZIP<br><input type="checkbox"/> DELETE  |                                            | 2.4 CITY-STATE-ZIP<br><b>***558.75 ***558.75</b>                                   |                                                                         |
| 9. TITLE<br><input type="checkbox"/> DELETE           |                                            | 3.1 TITLE<br><input type="checkbox"/> Change <input type="checkbox"/> Add          |                                                                         |
| 10. NAME<br><input type="checkbox"/> DELETE           |                                            | 3.2 NAME<br><input type="checkbox"/> Change <input type="checkbox"/> Add           |                                                                         |
| 11. STREET ADDRESS<br><input type="checkbox"/> DELETE |                                            | 3.3 STREET ADDRESS<br><input type="checkbox"/> Change <input type="checkbox"/> Add |                                                                         |
| 12. CITY-STATE-ZIP<br><input type="checkbox"/> DELETE |                                            | 3.4 CITY-STATE-ZIP<br><input type="checkbox"/> Change <input type="checkbox"/> Add |                                                                         |
| 13. TITLE<br><input type="checkbox"/> DELETE          |                                            | 4.1 TITLE<br><input type="checkbox"/> Change <input type="checkbox"/> Add          |                                                                         |
| 14. NAME<br><input type="checkbox"/> DELETE           |                                            | 4.2 NAME<br><input type="checkbox"/> Change <input type="checkbox"/> Add           |                                                                         |
| 15. STREET ADDRESS<br><input type="checkbox"/> DELETE |                                            | 4.3 STREET ADDRESS<br><input type="checkbox"/> Change <input type="checkbox"/> Add |                                                                         |
| 16. CITY-STATE-ZIP<br><input type="checkbox"/> DELETE |                                            | 4.4 CITY-STATE-ZIP<br><input type="checkbox"/> Change <input type="checkbox"/> Add |                                                                         |
| 17. TITLE<br><input type="checkbox"/> DELETE          |                                            | 4.5 TITLE<br><input type="checkbox"/> Change <input type="checkbox"/> Add          |                                                                         |
| 18. NAME<br><input type="checkbox"/> DELETE           |                                            | 4.6 NAME<br><input type="checkbox"/> Change <input type="checkbox"/> Add           |                                                                         |
| 19. STREET ADDRESS<br><input type="checkbox"/> DELETE |                                            | 4.7 STREET ADDRESS<br><input type="checkbox"/> Change <input type="checkbox"/> Add |                                                                         |
| 20. CITY-STATE-ZIP<br><input type="checkbox"/> DELETE |                                            | 4.8 CITY-STATE-ZIP<br><input type="checkbox"/> Change <input type="checkbox"/> Add |                                                                         |

14. SIGNATURE:  **8/12/97**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)

AL24524-2