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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997

DOCUMENT #	P94000078696
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Principal Place of Business Mailing Address 13644 SOUTHWEST 142 AVENUE 13644 SOUTHWEST 142 AVENUE SUITE D SUITE D MIAMI FL 33188 MIAMI FL 33188-6758 3. Date Incorporated or Qualified 3a. Date of Last Report 10/26/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0531149 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zio Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LLORD, MARIA 8501 SW 82 TERRACE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33143 B3** Zip Code 35/86-67/1 11Am 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. Stgrature, typod or purited name of registered agent and title if applicable (NOTE: Registered Agen) signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. THLE DELETE 1.1 TITLE Change Addition BEMCOMO, CARMEN I 1.2 NAME NAME 13844 SOUTHWEST 142 AVENUE, SUITE D STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CHTY - \$1 - 76 DELETE Change Addition THUE 21 TITLE LLORD, MARIA 2.2 NAME NAME 13644 SW 142 AVE #D STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-74P DELETE Change Addition THUE 31 TOTLE NAM: 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 011Y - 51 - 209 DELETE Change Addition TITLE 41 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 12 or Block 3 it changed, or on an attachment with an address.

6.4 CITY+ST-ZIP

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

**5.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

TITLE

ИАМЕ

City-St-ZiP

STREET ADDRESS CITY - ST- 7/P

OUTCOMES NAMED ARGIED IT BENCOMED NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

4/1/97

**FILED** 

Apr 15 1997 8:00am

Secretary of State

(301) >KI-1226
Daysine Phone #

Change

Addition