

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P94000085060

MUSICANA ENTERPRISES, INC.

Principal	Place of Business
7600 N.W	FIETH COURT

SUITE 206 MARGATE EL 33063 Mailing Address

7600 N.W. FIFTH COURT

SUITE 206

MARGATE FL 33063

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90032 008 ***158.75



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DO NOT WRITE IN THIS SPACE

				3. Date Incorporated or Qualifed			
OTT.: A	Pund			11/21/1994			
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For		
21 <i>/692</i>	Canal Jenn. 26 SAME			65-0602596	Not Applicable		
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional		
	, , , , , , , , , , , , , , , , , , ,			5. Certificate of Status Desired Fee Required			
City & State	// · · · · · · · · · · · · · · · · ·			6. Election Campaign Financing	\$5.00 May Be		
23 33068-4/28 28				Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Country	8. This corporation owes the current year Int	angible		
·				Personal Property Tax.			
24	9. Name and Address of Current	1=-1	 	10. Name and Address of New Registered			
-	9. Italie and Address of Current	Nogistered rigent	81 Name	1 . 0 0			
PUGLIESE, ANNETTE			Hnnelle P. KYAN				
	N.W. FIFTH COURT		82 Street Address (P.O. Box Number is Not Acceptable)				
	E 206		1692 CORAL Terroce				
	GATE FL 33063		63		ļ		
IVIPAN	CATE FL 33003		84 City A	/s +1 / sup . / FI	85 Zip Code		
			' \	lorth LAUDERDale, FL			
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							
office or a	egistered agent, or both, in the State o m familiar with, and-accept the obligati	t Florida. Such change was auth ons of. Section 607.0505, Florida	orized by the corpor a Statutes.	ation's board of directors. Thereby accept the appoin	intrient as registered		
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature when reinstating) DATE DATE							
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	DCEO	☐ DELETE	1.1 TITLE	4 - 00	Geange ☐ Addition		
NAME	PUGLIESE, ANNETTE		1.2 NAME	Annette P. RYAN			
STREET ADDRESS	1692 CORAL TERRACE		1,3 STREET ADDRESS	←-same			
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068	-4128	1.4 CITY-ST-ZIP				
TITLE	D D	DELETE	2.1 TITLE	Annette P. Ryan			
1	PUGLIESE, ANNETTE		2.2 NAME	Annelle F. Ayan			
NAME	1692 CORAL TERRACE						
STREET ADDRESS		4100	ין	- SAME			
CITY-ST-ZIP	NORTH LAUDERDALE FL 33068		2.4 CITY-ST-ZIP	1.0	Change Addition		
TITLE	VPTS	☐ DELETE	3.1 TITLE	- V.P. And Secretary	Par Onlange Madison		
NAME	PELLEGRINI, PAUL M III		3.2 NAME	די	}		
STREET ADDRESS	1917 EAST MARGATE DRIVE		3.3 STREET ADDRESS	SAME			
CITY-ST-ZIP	MARGATE FL 33063		3.4. CITY-ST-ZIP	<u></u>			
TITLE	TREASURE R.	☐ DELETE	4.1 TITLE	TREasurer ,	☐ Change 🔀 Addition		
NAME:	William P. RYAN,	JR. Codition	4.2 NAME	William P. Ryan, Jr.			
STREET ADDRESS	1692 COTAL TENACE	and allow	4.3 STREET ADDRESS	1692 Coral Terrace ,			
CITY-ST-ZIP	NorTh Laudendale, 71	.33068-4/28	4.4 CITY-ST-ZIP	North harderdale 7 33	0684198		
TITLE	THE THE WAS A ST. L. T. L.	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS		1		
			5.4 CITY-ST-ZIP		i		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		Change Addition		
TITLE		C) perci-	6.2 NAME		_ ,		
NAME			6.3 STREET ADDRESS		1		
STREET ADDRESS			6.3 STREET ADDRESS				

14. 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 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 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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: