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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000021073 (8)

PRODUCCIONES CUBA MUSICAL PUBLISHING, INC.

Principal Place of Business Mailing Address %HOLLAND & KNIGHT %HOLLAND & KNIGHT 701 BRICKELL AVE. 701 BRICKELL AVE. MIAMI FL 33131 **MIAMI FL 33131** 3. Date Incorporated or Qualified 3a. Date of Last Report 03/15/1995 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 12391 Street Not Applicable 15221 NM \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be City & State City & State Pembroke tines Trust Fund Contribution Added to Fees Pembro Ke 8. This corporation has liability for intangible tax under s 199.032, Yes No Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ELENA BARRANCO Street Address (P.O. Box Number is Not Acceptable INTRASTATE REGISTERED AGENT CORPORATION 82 701 BRICKELL AVE. 83 **SUITE 3000 MIAMI FL 33131** Zip Code 3302 6 Pembroke. mes 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the ebligations of, Section 607.0505, Florida Statutes. Elena Daranco SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 √12. OFFICERS AND DIRECTORS 13. ☐ Change Addition PRESIDENT 1.1 THILE TITLE BARRANCO 1.2 NAME MARIA T. NAME 87 COWET,#125 11300 NW 87 COWT, #125 Hialeuh Gradens, R 33026 1.3 STREET ADDRESS STREET AUDRESS 1.4 CITY-ST-ZIP DITY-ST-ZIP Sciretary Tressurer DELETE Elena H. Darranio ☐ Addition ☐ Change 2 1 TITLE TITLE 2.2 NAME NAME 12391 NW 11 STREET Pembroke Pines, FL 33026 2.3 STREET ADDRESS STREET ADDRESS 2 4 CHY+ST+ZIP CITY-ST-ZIP Change Addition DELETE TITLE 3 1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY-ST-ZIP CITY - ST - ZIP ☐ Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6. 1 TITLE THILE

6 2 NAME

6.3 STREET ADDRESS

6.4 City-St-ZiP

SIGNATURE:

NAME

STREET ADDRESS

CITY-SI-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(4). 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 logal effect as if made under oath; that I am an office floer 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 4-24-96 305-433-0308

CR2E034 (12/95)