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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000021073 (8)

PRODUCCIONES CUBA MUSICAL PUBLISHING, INC.											
Pri	Principal Place of Business Mailing Address										
0	NE GROVE	ISLE DRIVE	APT 706		ONE GROVE ISLE DRIVE						
COCONUT GROVE FL 33133					APT 706					DO NOT WRITE IN THIS SPACE	
US					COCONUT GROVE FL 33133 US					3. Date Incorporated or Qualified	
										03/15/1995	
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For	
21				⊢	26					65-0572474 Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.					SQ 75 Additional		
22	 -			├ ─┐	27					5. Certificate of Status Desired Fee Required	
	City & State				City & State					6. Election Campaign Financing \$5.00 May Be	
23	-			28	28					Trust Fund Contribution Added to Fees	
	Zip				ountry 8. This corporation owes or has paid the current year Intangible						
24		25 <u>29</u> <u>30</u>			30	Personal Property Tax due June 30. Yes No					
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent				
BARRANCO, ELENA						81 Name					
ONE GROVE ISLE DRIVE APT 706								Street Address (P.O. Box Number is Not Acceptable)			
COCONUT GROVE FL 33133											
										les 7: Orde	
							84	City		FL 85 Zip Code	
11	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 Signature, typed or printed name of registered agent and this if applicable (NOTE: Registered Agent signature required when renstating) DATE											
12		signature, typed		ANO DIREC		13.	o Ag	ent signatu	re required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TIT		13	CIT IOL IIO	211102 (2)1110.02	DELETE	1.1 T	ITLE		TPac	Change Addition	
NAI			ICO, EZENA				IAME			Barranco	
	REET ADDRESS		ROVE ISLE DRIVE					ADDRESS	0	ne Grave Isle Deve #706	
	Y-ST-ZIP		UT GROVE FL		•	1		ST-ZIP	0.0	ocenit Grove PL 33133	
TIT		P	<u> </u>		DELETE	2.1 7			Tree	easured Change Addition	
NAS	ME	BARRAN	ICO, MARIA T		/-	2.2 N	AME		Mo	arta Barranes	
STA	REET ADDRESS		ROVE ISLE DRIVE			2.3 S	TREFT	ADDRESS	(C)	re Grove tale Drive +++0k	
CIT	Y-ST-ZIP	COCON	UT GROVE FL			2.4 (HTY-	ST-7IP		exposed Grove FL 33133	
TITL					DELETE	3.1 T	TLE			☐ Change ☐ Addition	
NA	ME					3.2 N	AME				
STR	REET ADDRESS					3.3 S	TREET	ADDRESS			
CIT	Y-\$T-ZIP			·		3.4. (CITY-:	ST-ZIP			
TITL	- 1				DELFTE	4.1 T				☐ Change ☐ Addition	
NAM	ME į					4.21	AME		l		
STA	REET ADORESS					4.3 S	TREET	ADDRESS			
CiT	Y-ST-ZIP							31 - ZIP			
TITE	- 1				[_] DELETE	5.1 T				Change Addition	
NAN						5.2 N					
	REET ADDRESS							ADDRESS			
	Y-ST-ZIP			·~ 	Dr. ret			61 - 71P	 	AL 1320	
TiTi					☐ DELET É	6.1 1				Change Addition	
NA						6.2 N					
	NEET ADDRESS							ADDRESS			
	Y-ST-ZIP	artifu that the	e information emplies	d with this file	ing does not qualify			1-ZIP	ted in S	Section 119.07(3)(i), Florida Statutes. I further certify that the information	
14	indicated	on this annu	al report or suppleme	ental annual i	report is true and a	ccurate an	d th	at my si	gnature	e shall have the same legal effect as if made under oath; that I am an	
officer or director of the corporation of 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.											