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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000031466 (2) DOCUMENT # Corporation Name

DO-R	F-MI MII	ISIC CEN	ITER IN	IC.

DOTRETMI MUSIC CENTER INC. Principal Place of Business Maling Address 1829 S.W. BTH STREET 1829 S.W. 8TH STREET MIAMI FI MIAMI FL 3. Date Incorporated or Qualified 3a. Date of Last Report 04/21/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-1581798 21 26 Not Applicable 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 Trust Fund Contribution Added to Fees 28 $Z_{\rm IP}$ Z_{Ψ} Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No 24 29 30 Florida Statutes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RIVERO, ROLANDO L Street Address (P.O. Box Number is Not Acceptable) 1047 S.W. 12TH COURT (REAR) 83 MIAMI FL 84 City 85 Zip Code 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. DATE Signature, types or printed harm of registered agent and the flau of lank (NOTE: Bog specd Agent signature reduced when recasting). OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE 1 THE Change Addition TITLE PRESIDENT CR2E034 NAME 1.2 NAME RIVERO, ROLANDO L STREET ADDRESS 1.3 STREET ADDRESS 1829S.W. 3th STREET CITY - ST - ZIP 1.4 CITY - ST - ZIP MIAMI. FL33135 DELETE Change ☐ Add₁tion TITLE 2.1 THE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZiF DITY - ST - Z/P DELETE ☐ Change ■ Addition TITLE 3 1 THE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City+S1-ZiP 34 CITY - ST- 7 P Change □ DELETÉ 4 1 TITLE Addition TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5 1 TRUE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TILLE 6 1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP CITY-ST-ZIP 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)(k). 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 corporation or the corporation or the corporation of the corpor

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ROLANDO L RIVERO

4/10/96 Date

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(12/95)