

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P95000069646**

1. Corporation Name

**D.J. WIZZZZ MUSIC POOL & PROMOTIONS CORP.**

Principal Place of Business

**4711 NORTHWEST 79TH AVENUE  
SUITE 26-Z  
MIAMI FL 33166**

Mailing Address

**4711 NORTHWEST 79TH AVENUE  
SUITE 26-Z  
MIAMI FL 33166**

**FILED**  
**Jul 20, 1999 8:00 am**  
**Secretary of State**

07-20-1999 90001 039 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**09/11/1995**

4. FEI Number

**65-0659647**

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

8. This corporation owes the current year  
Intangible Personal Property.

☒ Yes ☐ No

2. Principal Place of Business

**21** Suite, Apt. #, etc.

**22** City & State

**24** Zip

**25** Country

2a. Mailing Address

**26** Suite, Apt. #, etc.

**27** City & State

**29** Zip

**30** Country

9. Name and Address of Current Registered Agent

**VALDES, JORGE  
5280 N.W. 7ST APT 306  
MIAMI FL 33126**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **V** ☐ DELETE  
NAME **VALDES, JORGE**  
STREET ADDRESS **5280 NW 7 ST APT 306**  
CITY-ST-ZIP **MIAMI FL 33126**

TITLE **P** ☐ DELETE  
NAME **NODAL, MONICA**  
STREET ADDRESS **4440 NW 79 AVE APT 2H**  
CITY-ST-ZIP **MIAMI FL 33166**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PRESIDENT** ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE **Vice President** ☒ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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.

SIGNATURE:

*Jorge Valdes*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**07-12-99**

Date

Daytime Phone #

CR2E034 (5/99)

590783-90001-39  
P95000069646

**STEVEN DUBOSE C.P.A., P.A.**

6825 S.W. 154TH COURT  
MIAMI, FLORIDA 33193  
(305) 385-5261

July 12, 1999

Fla. Dept. of State  
Division of Corporations  
Annual Reports Filings  
PO Box 1500  
Tallahassee, Fl. 32302-1500

Re: D.J. Wizzz Music Promotions Corp. P95000069646

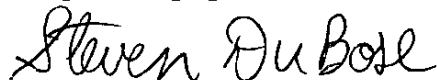
Gentlemen,

It has been brought to my attention that my client failed to file its annual report with your office in a timely manner.

My client's partner who was in charge of the filing of Tax documents in the past years died from an extended battle with cancer at or near the time this form was due. The surviving partner is filing the annual report with your office as soon as possible after learning it was due on May 1, 1999 with your notice of delinquency. My client is also enclosing a check in the amount of \$ 150.00 to pay the regular annual report fee. Please abate the penalty that is due with this late filing based on the above mentioned reasonable cause. My client did not intentionally file this return late and is aware of the necessary filing requirements for future filings with your office.

Thank you for your cooperation and attention to this matter and let us know if you need any further information to resolve the filing of my client's annual report.

Very truly yours,



Steven DuBose C.P.A.

cc: Jorge Valdes