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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000065336 (5)

GOYARROLA MUSIC ENTERPRISE, INC.

FILED Mar 03 1997 8:00am Secretary of State



Principal Place of Busine	nncipal Place of Business Mailing Address)	I B 171 18 4 1	
30 SHORE DRIVE NORTH MIAMI FL 33133		30 SHORE DRIVE NORTH MIAMI FL 33133-2614							
					3, Date Incorporated or Qualified 08/06/1996	3a. Da	te of Last R	Report	
2. Principal Place of Bu		2a. Mailing Address			4. FEI Number		Ar	oplied For	
21 600 NE	36th St	26 600 NG 36th St.			65-0689949				
Suite, Apt. #, etc. 22 1403		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired	
Cily & State MIAMI	<u> </u>	City & State		•	Election Campaign Financing Trust Fund Contribution	П	\$5.00 May Be Added to Fees		
Zip	Country Zip Country		8. This corporation has liability for i	ntanoible					
24] 33(37)	25 USA	29 33137	30 US	A		☐ Yes 💆 No			
	ne and Address of Curren	t Registered Agent			10. Name and Address of New Re	gistered A	gent		
HAHN, SUSA	N.		81	Name					
444 BRICKEL	l ave		82	Street	Address (P.O. Box Number is Not Acceptat	le)	 	,	
MIAMI FL 33	131			L					
			83						
			84	City		FL	85 Zip	Code	
11. Pursuant to the provoffice or registered	nsions of Sections 607.0502 agent, or both, in the State	2 and 607.1508, Florida Statute of Florida, Such change was a	es, the abov	e-named y the corp	corporation submits this statement for the poration's board of directors. I hereby accept	urpose of	changing in ointment as	ts registered registered	
agent I am familior	with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statute	S.					
Signature typ	ed or princed frame of registered agor			ent signatura	required when reinstating)	DATE			
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFIC			RS IN 12 Addition	
TITLE D	DON A AITOD	L DELETE	1.1 TiTLE		D 9	•	Change	Addition	
	AS OLIOPE PORTE MODELL		1.2 NAME		MITOR GRYANROUM 600 NE 36+ St #1403				
4.414.541	FL 33133			I ADDRESS					
CITY - ST - ZIF MIAMI	IL 33133	DELETE	1.4 CiTY-1 2.1 TITLE	SI-ZIP	MIAMI & 33137 D UP		Change	Addition	
NAME			2.2 NAME		Jesus Richardo Goyma	2064	Change	S Troumon	
STREET ADDRESS			1	T ADDRESS	600 NE 36th 5+ #140	3			
CITY - S1 - ZIP			2. 4 CITY-		MIAMI & 37137	•			
TITLE		DELETE	3.1 TITLE	51-14	7411111 10 3363 /		Change	Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	ADDRESS					
CHTY - ST - ZIP			3.4. CITY-	ST-ZIP					
TIFLE	DELETE		4.1 TITLE				Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREE	T ADDRESS					
CITY - ST - ZIP			4.4 CITY-	ST-ZIP					
TITLE			5.1 TITLE				Change	Addition	
NAME:			5.2 NAME						
STREET ADDRESS				1 ADDRESS					
CITY - \$1 - 7IP		☐ DELETE	5.4 City -	ST-ZIP			Change	Addition	
THILE		□ DELETE	61 TITLE				Change	Addition	
NAME PERCENTANTANCES:			6.2 NAME	r anneree					
STREET ADDRESS				I ADDRESS					
City-St-ZiP 14. I do hereby certify I	hat the information supplier	with this filing does not qualif	6.4 CiTY-:		Lated in Section 119.07(3)(i), Florida Statute	s. I further	certify that	t the	
information indicate	d on this annual report or s	upplemental annual report 🎉 tr	rue and acc	urate and	that my signature shall have the same legal eport as required by Chapter 607 Florida S	i effect as	. if made un	nder oath: that	
	or block is replanged, of	on an attachment with an add) - +=-		2/05/97	1200	1020	.9299	
SIGNATURE:	SIGNATURE AND TYPED OR	SHINTED MAKE OF SHARING OFFICER	OR DIRECTOR		Day	ל <i>בו</i> על.	/J T J lylime Phone #	1711	