

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000071310

FILED
Apr 01, 2004
Secretary of State

Entity Name: MIAMI BEAT PRODUCTIONS, INC.

Current Principal Place of Business:

9275 N BAYSHORE DR
MIAMI SHORES, FL 33138 US

New Principal Place of Business:

Current Mailing Address:

9275 N BAYSHORE DR
MIAMI SHORES, FL 33138 US

New Mailing Address:

FEI Number: 65-0692579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

APONTE, CARLA S
15488 SW 99TH LN
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

APONTE, CARLA S
9275 N BAYSHORE DR.
MIAMI, FL 33186 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CARLA APONTE

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: APONTE, CARLA S
Address: 15488 SW 99TH LN
City-St-Zip: MIAMI, FL 33196

Title: DST () Delete
Name: LEMOS DO NACIMENTO, CESAR M
Address: 15488 SW 99TH LN
City-St-Zip: MIAMI, FL 33196

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLA APONTE

DP

04/01/2004

Electronic Signature of Signing Officer or Director

Date