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May 02 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000073048 (6)

1. Corporation Name  
A.T. MUSIC INC.

Principal Place of Business  
9639 SW 152 AVE  
MIAMI FL 33196

Mailing Address  
9639 SW 152 AVE  
MIAMI FL 33196-1241



3. Date Incorporated or Qualified  
08/29/1996

3a. Date of Last Report  
8-27-96

2. Principal Place of Business  
21 9639 S.W.152TH AVE.  
Suite, Apt. #, etc.

2a. Mailing Address  
26 9639 S.W.152TH AVE.  
Suite, Apt. #, etc.

4. FEI Number  
95-4433846

Applied For  
Not Applicable

22

27

5. Certificate of Status Desired ☒ \$8.75 Additional  
Fee Required

23 MIAMI FL

28 MIAMI FL

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

24 33196-1241 25 USA

29 33196-1241 30 USA

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BARREIRO, VITAL A  
9639 SW 152 AVE  
MIAMI FL 33196

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 installing)

DATE

4-25-97

12. OFFICERS AND DIRECTORS

TITLE SECRETARY ☐ DELETE  
NAME ANA S. TORRES  
STREET ADDRESS 12572 S.W.73 TERRACE  
CITY-ST-ZIP MIAMI FL 33183

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

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 VITAL A. BARREIRO  
1.3 STREET ADDRESS 9639 S.W.152TH AVE.  
1.4 CITY-ST-ZIP MIAMI FL 33196

2.1 TITLE VICE-PRESIDENT ☒ Change ☐ Addition  
2.2 NAME MODESTO A. TORRES  
2.3 STREET ADDRESS 12572 S.W.73 TERRACE  
2.4 CITY-ST-ZIP MIAMI FL 33183

3.1 TITLE TREASURER ☐ Change ☒ Addition  
3.2 NAME MIREYA A. BARREIRO  
3.3 STREET ADDRESS 9639 S.W.152TH AVE.  
3.4 CITY-ST-ZIP MIAMI FL 33196

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 do 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: VITAL A. BARREIRO-PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-97

Date

(305) 387-8546

Daytime Phone #

CR2E034 (9/96)