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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 21 1997 8:00am

Secretary of State

Daytime Phone # 0004618

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000097066 (0) 1. Corporation Name

PEREZ SOTO MUSIC CORP.

Principal Place of Business

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

3880 ALCANTARA AVENUE 3880 ALGANTARA AVENUE MIAMI FL 33178-2348 MIAMI FL 33178 3. Date Incorporated or Qualified 3a. Date of Last Report 12/02/1996 2. Principal Place of Business c/o 101 Madeira Avenue 4. FEI Number Applied For 2a. Maijing Address c/o 101 Madeira Avenue 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State Coral Galbes, YL \$5.00 May Be 6. Election Campaign Financing Coral Gables, Fl 28 Trust Fund Contribution Added to Fees Country **Dade** Country 8. This corporation has liability for intangible tax under s. 199.032, 33134 33134 Dade Yes No 25 29 Florida Statutes g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent AMERILAWYER CHARTERED Arazoza, Comas, de Torres & Fernandez-Fraga, 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 84 Coral Gables, FL 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) e of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. DELETE 1.1 TITLE Change Addition TITLE PEREZ SOTO, JUAN CARLOS 1,2 NAME NAME 3880 ALCANTARA AVENUE 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33178** CITY - S1 - 21P 1.4 CITY-ST-ZIP STD DELETE Change Addition 2.1 TITLE TIFLE PECCHIO, CLAUDIA 2.2 NAME NAME 3880 ALCANTARA AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33178 CITY-ST Z-P 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 0/1Y - ST- 7H 3.4. CITY-ST-ZIP DELETE Change Addition TIFLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5,1 TITLE THE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CHTY-ST-ZIP DELETE Change Addition THEF 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

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.

SIGNING OFFICER OR DIRECTOR