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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000099346 (4)

RB MUSIC, INC.

**FILED** Jan 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 10201 HAMMOCKS BLVD. 10862 S.W. 153RD AVE. MIAMI FL 33196 SHITE 153-228 DO NOT WRITE IN THIS SPACE MIAMI FL 33196 3. Date Incorporated or Qualified 12/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEi Number Applied For 21 26 65-0779509 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional  $\Box$ 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 25 ☐ Yes ☐ No 30 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GONZALEZ, RAMON 10862 S.W. 153 AVENUE Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33196 83 84 City 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 little if applicable (NOTE, Registered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 \_\_ DELETE TITLE \_\_ Change \_\_\_ Addition 1.1 TITLE NAME GONZALEZ, NILSA 1.2 NAME 10862 S.W. 153 AVENUE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33196** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME GONZALEZ, RAMON 2.2 NAME 10862 S.W. 153 AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33196 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP TITLE ☐ DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CSTY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 City - ST - ZIP DELETE TITLE Change Addition 6.1 DILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 trested 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 attaching intwith an address.

SIGNATURE:

385-4418 REQUIRED