## 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 # P97000049360 (5)

RIVER RECORDS, INC.

**FILED** Apr 10 1998 8:00am Secretary of State

					<u> </u>	
Principal Place of Business Mailing Address					( 1441)561 114 1911) 1941 48411 48411 48411 48411 48411 48411 48411 48411 48411 48411 48411 48411 48411 48411	
9750 N.W. 28TH \$TREET SUITE 202" (1-0) MIAMI FL 33142		3750 N.W. 20TH STREET SUITE 202— (20 ) MIAMI FL 33142		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
O Delegate of C	No. of D. vissos	On Marilian Address			06/02/1997 4, FEI Number	1 1
	Place of Business	2a. Mailing Address			65-0756/0/	Applied For
Suite, Apt.	* etc	Suite, Apt. #, etc.				Not Applicable \$8.75 Additional
22		<del>  </del>	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	······································		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	p Country Zip		Country		8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curre	ent Registered Agent		0.50	10. Name and Address of New Register	ed Agent
	DRETA, TEODORO A		81	l Name		
2500 W. 56TH ST			82 Street Ad		ddress (P.O. Box Number is Not Acceptable)	
APT. 1203			83			
Hiv	ALEAH FL 33016		~	1		
•			84	City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508. Florida Statute	as, the abov	ve-named cor	rporation submits this statement for the purpos	
office or r	registered agent, or both, in the Statem familiar with, and accept the obli	te of Florida. Such change was a	uthorized h	ov the corpora	ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE	e and the second transfer and the second	gations of coolon controls, the	noo olalak			
Signature, typed or printed name of registered agent and title if applicable (NOTE. F				gent signature req.	Jired when reinstating) DAY	E
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	DP	DELETE	1.1 TITLE			Change Addition
NAME	MORETA, TEODORO A	<b>500</b>	1.2 NAME	1		
STREET ADDRESS	2500 W. 58TH STREET, #12 HIALEAH FL 33016	203		T ADDRESS		
CITY-ST-ZIP	HALEAN FL 33018	DELETE	1.4 CITY- 2.1 TITLE	ST-ZIP		Change Addition
NAME			22 NAME	İ		
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP			2.4 CITY			
TITLE	-	DELETE	3.1 TITLE	<u> </u>		Change Addition
NAME			3.2 NAME			j
STREET ADDRESS	,		3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	·ST-ZIP		
TITLE	,	DELETE	4.1 TITLE		· —	☐ Change ☐ Addition
NAME			4. 2 NAME	<u>:</u>		
STREET ADDRESS	€		4.3 STREE	T ADDRESS		, / l
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		# /
TITLE		☐ DELETE	5.1 TITLE			Chapge Addition
NAME			5.2 NAME	T T		7////
STREET ADDRESS			1	T ADDRESS	41	1410 1
CITY-ST-ZIP		DELETÉ	5.4 CITY-	ST - ZIP		Change Addition
TITLE Name		□ Decent	6.1 TITLE 6.2 NAME		8000024859	Tends Linearities
STREET ADDRESS	Y		P	T ADDRESS	-04/13/9801011	1020
CITY-ST-ZIP	· •		6.4 CITY-		***150.00	1

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 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.

PLOUMBLE