

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P97000057616 (9)**

1. Corporation Name

CLUB INT'L DE COLECCIONISTAS DE DISCOS, INC.

Principal Place of Business

**145 MADEIRA AVE.
SUITE 316
CORAL GABLES FL 33134**

Mailing Address

**145 MADEIRA AVE.
SUITE 316
CORAL GABLES FL 33134**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/30/1997

2. Principal Place of Business

21 126 Zamora Ave.

2a. Mailing Address

26 P.O. Box 143371

Suite, Apt. #, etc.

22 Suite G

Suite, Apt. #, etc.

27 Coral Gables

City & State

23 Coral Gables

City & State

28 Coral Gables

Zip

24 33134

Country

25 U.S.A.

Zip

29 33134

Country

30 U.S.A.

4. FEI Number

65-0761516

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**RICO SALAZAR, JAIME
145 MADEIRA AVE.
SUITE 316
CORAL GABLES FL 33134**

10. Name and Address of New Registered Agent

81 Name

Jaime Rico Salazar

82 Street Address (P.O. Box Number is Not Acceptable)

126 Zamora Ave. Apto G

83

84 City

Coral Gables

FL

85 Zip Code

33134

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **Director - Treasurer** ☐ DELETE

NAME **Jaime Rico Salazar**
STREET ADDRESS **126 Zamora Ave. Apto G.**
CITY-ST-ZIP **Coral Gables FL 33134**

TITLE **Sub-Director - Secretary** ☐ DELETE

NAME **Ricardo Valencia**
STREET ADDRESS **1208 NW 72ND AVENUE**
CITY-ST-ZIP **Miami FL**

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS ☐ DELETE
CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS ☐ DELETE
CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS ☐ DELETE
CITY-ST-ZIP ☐ DELETE

TITLE ☐ DELETE

NAME ☐ DELETE
STREET ADDRESS ☐ DELETE
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

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 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:

SIGNATURE REQUIRED

Agosto 2/98 205-448-6125



FILED
Aug 20 1998 8:00am
Secretary of State

CR2E034 (5/98)