May 07, 1999 8:00 am Secretary of State

05-07-1999 90136 033 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000057616

CLUB INT'L DE COLECCIONISTAS DE DISCOS, INC.

Principal Place	e of Business	Mailing Address			•
126 ZAMORA A	VEN	PO BOX 143371			
SUITE G		SUITE 316		DO NOT MORE IN THIS SPACE	
CORAL GABLES FL 33134		CORAL GABLES FL 33134 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
03		00		06/30/1997	
3 Bringing D	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
· ·	ace or Business	26 P.O. BOX /	V337/	65-0761516	Not Applicable
21 Suite Ant	# 010	Suite, Apt. #, etc.		05 070 1510	\$8.75 Additional
Suite, Apt.	#, etc.	27 Suite, Apr. #, etc.		5. Certifcate of Status Desired	Fee Required
22 City & Stat				6. Election Campaign Financing	\$5.00 May Be
23		28 Co Ral Gab	ler Fl	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
24	25	$\frac{1}{29}$ $\frac{1}{3}$ 3134 $\frac{1}{30}$	Country USA	Personal Property Tax.	☐Yes ⊠ No
24	9. Name and Address of Curren			10. Name and Address of New Registered	Agent
<u> </u>			81 Name		
JAIM	E RICO SALAZAR		20 21 10 11	(D.O. Day M. Assaylable)	
126 ZAMORA AVE. APT G			82 Street Addre	ess (P.O. Box Number is Not Acceptable) 16 Zamora Ave - Apto	G
SUITE 316			83		
COR	AL GABLES FL 33134				
,			84 City 🕝	pal gables FI	85 Zip Code
44 Dumuma	to the previous of Costions 507.050	2 and 607 1508 Florida Statutes 1	the above-named come	pration submits this statement for the purpose of	changing its registered
l office or r	egistered agent, or both, in the State	of Florida. Such change was autho	inzed by the corporatio	n's board of directors. I hereby accept the appo	intment as registered
agent. I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Florida	Statutes.		
SIGNATURE		A STATE DOOR (NOTE Door	istered Agent signature required	when reinstating) DATE	
12.	Signature, typed or printed name of registered ager	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AT	D DIRECTORS IN 12
TITLE	D			io	Change Addition
NAME	SALAZAR, JAIME RICO		12 NAME J	aime Rico Salazar	
	126 ZAMORA AVE APT G	1	1.3 STREET ADDRESS	-•••	
STREET ADDRESS	CORAL GABLES FL 33134		1.4 CITY-ST-ZIP		
CITY-ST-ZIP	DS	™ DELETE	2.1 TITLE		☐ Change ☐ Addition
		,	2.2 NAME		_
NAME	VALENCIA, RICARDO				
STREET ADDRESS	1208 NW 72ND AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		☐ Change ☐ Addition
-TITLE			3.1.TITLE		
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		Change Addition
TITLE		_	4.1 TITLE		El cuange El radiition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		·
CITY-ST-ZIP			4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE			5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		İ
STREET ADDRESS			5.3 STREET ADORESS		
CITY-ST-ZIP			5.4 C/TY-ST-ZIP		
TITLE		_ v	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

6.3 STREET ADDRESS

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, with all other like empowered.