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).

FILED
Oct 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # **P97000060170 (2)**

1. Corporation Name
MIAMI MUSIC COMPANY

Principal Place of Business	Mailing Address
1280 SOUTH ALHAMBRA CIRCLE. #2112 CORAL GABLES FL 33146	1280 SOUTH ALHAMBRA CIRCLE. #2112 CORAL GABLES FL 33146

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/10/1997

2. Principal Place of Business	2a. Mailing Address
21	26 1301 Parilla de Avila
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 TAMPA, Fla
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 33613 / Country 30

4. FEI Number: 65-0770550 — 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	10. Name and Address of New Registered Agent
OLDER, BENJAMIN C 1280 SOUTH ALHAMBRA CIRCLE, #2112 CORAL GABLES FL 33146	81 Name: Corporate Creations Enterprises, Inc. 82 Street Address (P.O. Box Number is Not Acceptable): 4521 PGA Blvd. #211 83 84 City: Palm Beach Gardens FL 85 Zip Code: 33418

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: See attached fax. DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	S/T ☐ Change ☐ Addition
NAME	OLDER, BENJAMIN C	1.2 NAME	~~Lois~~ OLDER, LOIS R.
STREET ADDRESS	1280 SOUTH ALHAMBRA CIRCLE, #2112	1.3 STREET ADDRESS	1301 PARILLA DE AVILA
CITY-ST-ZIP	CORAL GABLES FL 33146	1.4 CITY-ST-ZIP	TAMPA, FLA. 33613
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	200001265741 -10/07/98--01020--030 ***550.00
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	10/6
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (5/98)

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: [illegible] 9/17/98 305-266-6403

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $400 (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 # P97000060170 (2)

1. Corporation Name
MIAMI MUSIC COMPANY

Principal Place of Business	Mailing Address
1280 SOUTH ALHAMBRA CIRCLE #2112 CORAL GABLES FL 33146	1280 SOUTH ALHAMBRA CIRCLE #2112 CORAL GABLES FL 33146

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/10/1997

2. Principal Place of Business 21	2a. Mailing Address 26 1301 Perilla de Avila
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Tampa, Fla
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 33613 / Country 30

4. FEI Number: ☐ 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
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes ☐ No

8. Name and Address of Current Registered Agent
OLDER, BENJAMIN C
1280 SOUTH ALHAMBRA CIRCLE, #2112
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent
01 Name: CORPORATE CREATIONS ENTERPRISES INC
02 Street Address (P.O. Box Number is Not Acceptable): 4521 PGA Blvd., #211
03
04 City: PALM BEACH GARDENS FL 05 Zip Code: 33418

11. Pursuant to the provisions of section 607.0505 and 607.1808, 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] Luis A. Uriarte, VP 9.18.98
Signature of new registered agent (if applicable) — NOTE: Registered agent's signature required when reinstating! — DATE

12 OFFICERS AND DIRECTORS	13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
OLD: D ☐ DELETE NAME: OLDER, BENJAMIN C STREET ADDRESS: 1280 SOUTH ALHAMBRA CIRCLE, #2112 CITY-ST-ZIP: CORAL GABLES FL 33146	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE ☐ DELETE NAME STREET ADDRESS CITY-ST-ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP ☐ Change ☐ Addition

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: _____ Date
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR

CR2E034 (5/96)