## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Feb 10, 2005 08:00 AM Secretary of State **DOCUMENT # P97000061001** 1. Entity Name MUSIC TRENDS, INC. Principal Place of Business Mailing Address 9860 SW 12TH TERRACE 5477 NW 72 AVE MIAMI, FL 33166 MIAMI, FL 33174 CR2E034 (10/03) 01142005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0870359 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE NORIEGA, MELVIN F 5477 NW 72 AVE MIAMI, FL 33166 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed game of registered agent and title if applicable. (NOTE: Registered Apent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE |S \$150.00 Trust Fund Contribution Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10, TITLE NORIEGA, MELVIN F NAME STREET ADDRESS 5477 N.W. 72 AVE. U00000223785 CITY-ST-ZIP MIAMI, FL 33166 02/10/05-80058-022 150.00 TITLE MELVIN, NORIEGA J NAME STREET ADDRESS 5477 N.W. 72 AVE CITY-ST-ZIP MIAMI, FL 33166 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE πης NAM\* STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or typice empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

**FILED**