PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000061847

1. Corporation Name

FILED Feb 26, 1999 8:00 am Secretary of State

02-26-1999 90026 032 ***150.00

GLOBO MUSIC PUBLISHING CORPORATION					
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Principal Place	of Business	Mailing Address			T 1604/601 ing 1044 (0014 Pauls abstracting nove birds liber lasts arbit soot ions
2170 NW 87TH AVENUE 2170 NW 87TH AVENUE					
MIAMI FL 33172 MIAMI FL 33172					
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
Mail and Add					07/16/1997 4, FEI Number Applied For
Principal Place of Business 2a. Mailing Address					65-0802504 Not Applicable
26 Suite, Apt. #, etc. Suite, Apt. #, etc.			_		\$8.75 Additional
					5. Certificate of Status Desired Fee Required
22 27 City & State City & State					6. Election Campaign Financing \$5.00 May Be
23 28					Trust Fund Contribution Added to Fees
Zip Country Zip Co			Country		8. This corporation owes the current year Intangible
24					Personal Property Tax. ☐ Yes ☐ No
	9. Name and Address of Curren				10. Name and Address of New Registered Agent
			81	Name	}
GARCIA-VIDAL, RAOUL ESQ 82 Street Adv				t Address (P.O. Box Number is Not Acceptable)	
COLUMBUS CENTER, SUITE 1450				Subcir	
i	ALHAMBRA PLAZA		83		
COR.	AL GABLES FL 33134		84	City	85 Zip Code
			04	City	FL (8) 2 Possion _
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.					
1	,,,				
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable. (NOTE: R	egistered Agen	t signature re	required when reinstating) DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	ELETE	1.1 TITLE		PRESIDENT Change Addition
NAME	PAZ, RAMON		1.2 NAME	į	MONICA AGUILO
STREET ADDRESS	2170 NW 87TH AVENUE		1.3 STREET	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33172		1.4 CITY-S	-ZIP	MIAMI FL 33172
TITLE		☐ DELETE			SECRETARY Change Addition
NAME			2.2 NAME	}	AMALIA ELENA FIGUEROA
STREET ADDRESS			23 STREET	ADDRESS	2170 111 07111 1110102
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP	MIAMI FL 33172
TITLE		☐ DELETE	3,1 TTLE	Į	☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET	ADDRESS	3
CITY-ST-ZIP		575	3.4. CITY-S	T-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	4.1 TITLE	ŀ	Change (Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET	ADDRESS	§
CITY-ST-ZIP			4.4 CITY-S	Γ- ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE	Ì	☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET		اد
CITY-ST-ZIP		T OF STE	5.4 CITY-S' 6.1 TITLE	I-ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	i .	Ì	T CHRIBS D Applicati
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET		j
CITY-ST-ZIP			64 CITY-S	I-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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in officer or director of the cor Block 12 or Block 13 if cha with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP