SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$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 #

1. Corporation Name P97000063309 (3)

## **FILED** Oct 07 1998 8:00am Secretary of State

HUHRICANE MUSIC, INC.			
			{
Principal Place of Business	Mailing Address		
29803 BISCAYNE BLYD., STE. 200-	20903 BISCAYNE BLVD::- 6TE	<del>:- 20</del> 0	
AVENTURA-FL 33180	AVENTURA_FL_33180		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
,			07/22/1997
2. Principal Place of Business	2a. Mailing Address		4, FEI Number Applied For
27 100 SE2nd ST.	26 100 SE	and ST	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #. etc.		5 Codificate of Status Degland \$8.75 Additional
22 28 + WOR	2700+00		5. Certificate of Status Desired Fee Required
City & State	City & State	5	6. Election Campaign Financing \$5.00 May Be
23 miami, te	28 MIQMI,	1 –	Trust Fund Contribution Added to Fees
Zip Country	トラック、ト	Country	8. This corporation owes or has paid the current year Intangible
24 33131 25 45		<u> </u>	Personal Property Tax due June 30. Yes No No
9. Name and Address of Current	Registered Agent	81 Name a	10. Name and Address of New Registered Agent
WOLFE, RICHARD C		BI HAPPY C	hard C. Walte_
20003-DIQOAVNE-DLVD., STE. 200		82 Street Addr	
AVENTURA FL 33100		83	DE and DI.
		"  <i>&amp;</i> 8	Hoor
		84 City	85 2-Code 01
14 B		<u> </u>	19m1 FL 33[3]
11. Pursuant to the provisions socious 607,0502 office or registered agent for both, in the state of	and 607.1508, Florida Statutes, of Florida. Such change was auf	the above-named corporation	ration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered
agent. I am familiar with and account the obligat	ions of, section 607.0505, Florid	da Statutes.	0100
SIGNATURE Signature Appendar pripagar Amme of registered agent	ichara c.u	: Registered Agent signature requ	uired when reinstating) DATE
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D'ST	DELETE	1.1 TITLE	6 Change ☐ Addition
NAME WOLFE, RICHARD		1.2 NAME	Throad unite
STREET ADDRESS 20003 BISCAYNE BLVD. STF. 2	200_	1.3 STREET ADDRESS	0 56 260 ST. 28 Floor
CITY-ST-ZIP AVENTURA FL 33180		1.4 CITY-ST-ZIP	niami, fr 33131
	DELETE	2.1 TITLE	Change Addition
NAME With michelle		2.2 NAME	"alanle 11) Alte
STREET ADDRESS		2.3 STREET ADDRESS	TICHERC 26 ST. 28 HOOF
CITY-ST-ZIP		2.4 CiTY-ST-ZIP	mami, ft 33131
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
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	
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	7	6.3 STREET ADDRESS	
CITY-ST-ZIP	/	6.4 CITY-ST-ZIP	
14. I hereby certify that the information supplied with 1	his filing does not qualify for the	exemption stated in sect	tion 119.07(3)(i), Florida Statutes. I further certify that the information

an officer or director of the composition of the first 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 composition of 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 composition of the content with an address.