

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000069135 (6)

1. Corporation Name

MADIATONE MUSIC, INC.

Principal Place of Business Mailing Address
100 NO BISCAYNE BLVD 30 FLOOR 100 NO BISCAYNE BLVD 30 FLOOR
MIAMI FL 33132 MIAMI FL 33132

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1997

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**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 **100 N BISCAYNE BLVD**

Suite, Apt. #, etc.

22 **#3000**

City & State

23 **MIAMI FL**

Zip

24 **33132**

Country

25 **USA**

2a. Mailing Address

26 **100 N BISCAYNE BLVD**

Suite, Apt. #, etc.

27 **#3000**

City & State

28 **MIAMI FL**

Zip

29 **33132**

Country

30 **USA**

9. Name and Address of Current Registered Agent

HEYDASCH, AXEL
100 NO. BISCAYNE BLVD 30 FLOOR
MIAMI FL 33132

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

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

Signature of person providing information for this filing

Signature of Registered Agent (signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **PSD**
STREET ADDRESS **DIAMOND, MARCUS T**
CITY-ST-ZIP **5151 COLLINS AVE UNIT 1517**
MIAMI BCH FL 33140

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME **PSD**
13 STREET ADDRESS **DIAMOND, MARCUS T**
14 CITY-ST-ZIP **5161 COLLINS AVE #1517**
MIAMI BCH FL 33140

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME **000002542880**
53 STREET ADDRESS **-06/01/98--01119--004**
54 CITY-ST-ZIP *****150.00**

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-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 is supplemental and does not constitute and accuracy and that my signature shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the chief executive officer 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 as an additional name with additions.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/ MARCUS DIAMOND

04/28/98

(305)358-8400

Date

Typed Name

CR2E034 (10/97)