

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Sep 03, 1998 8:00 am
Secretary of State

DOCUMENT # **P97000102120 (7)**

1. Corporation Name

LIGHT CONCERT, CORP.

Principal Place of Business

Mailing Address

**780 N.W. LEJUNE RD. STE. 516
FL 33126**

**780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1997

4. FEI Number

65-0807666

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

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

27

City & State

City & State

28

Zip

Country

25

Zip

Country

30

9. Name and Address of Current Registered Agent

**AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

**DPT
DELLA NOCE, HENRY E
780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**D
BARRETO ALEJANDRO
780 NW LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ Change

☒ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE

**SDV
BARROSO, MACHADO
780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ DELETE

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE

**SDV
BARROSO, MACHADO
780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ DELETE

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE

**SDV
BARROSO, MACHADO
780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ DELETE

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE

**SDV
BARROSO, MACHADO
780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ DELETE

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

STREET ADDRESS

CITY-ST-ZIP

TITLE

**SDV
BARROSO, MACHADO
780 N.W. LEJUNE RD. STE. 516
MIAMI FL 33126**

☐ DELETE

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

STREET ADDRESS

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 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:

SIGNATURE REQUIRED

Aug. 21, 1998

Date

Daytime Phone #

CR2E034 (5/98)