1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000056101

1. Corporation Name

VARISPEED MUSIC PRODUCTIONS, INC.

May 05, 1999 8:00 am Secretary of State

05-05-1999 90160 014 ***150.00



Principal Place	OT BUSINESS	Mailing Address							
2801 NE 183 S	T. #607	P O BOX 7126							
AVENTURA FL 33160-2128 HOLLYWOOD FL 33081						OO NOT WE	NTE IN TH	e ebace	
					3. Date Incorporate			3 SPACE	
					1	o or Qualifet	J		
					06/23/1998 4. FEI Number			- I Ans	olied For
2Principat Pl	ace of Business	2a. Mailing Address	n Boh.	AL:A		/// O O	•		Applicable
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Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of State	us Desired		Fee Rec	
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City & State	'Da 11'1.	28 Golden Bet		rida	6. Election Campaig Trust Fund Contr	-		\$5.00 I Added to	•
Zip	Country	Zip	Country	_	8. This corporation		rrent year l		-
24 331	60 25 US	29 33160 3	o U	<u>></u>	Personal Propert				□No
	9. Name and Address of Current	Registered Agent			10. Name and Addr	ess of New	Registere	d Agent	
B00	LIBERO ANDOCH E		81 Na	me R	oshberg	Andre	en E	Ξ	
ROSHBERG, ANDREW E			82 Str	eet Addres	ss (P.O. Box Number i	s Not Accep	tab <u>je</u>)		
2801 NE 183RD STREET				147	+ Golden	Ban	<u>. 'Dri</u>	ve	
#607			83		•		-		
AVEI	NTURA FL 33081		84 Cit					. 85 _Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,					den Bea	لل	F	r II.3,3	160
11. Pursuant office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State o	and 607.1508, Florida Statutes £Florida. Such change was autl	, the above-har horized by the o	neo corpoi corporation	ration submits this state o's board of directors. I	hereby acco	ept the app	ointment as reg	istered
agent. I a	to the provisions of Sections 607.0502 egistered agent, or both, in the Stete of m familiar with, and accept the obligation	ons of Section 607.0505, Florid	ta Statutés.				1 _ 1 _	_	
SIGNATURE	$-(aQ_1 +$	<u> </u>	egistered Agent signa			1	[] [9	
12.	Signature, typed or printed name of registered agent OFFICERS AND		13.	iture requirec i	ADDITIONS/CHA	NGES TO O	FFICERS A	ND DIRECTO	RS IN 12
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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 suppliemental 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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

Andro,