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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000082888

1. Corporation Name

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

H.N. RECORDING STUDIO & PRODUCTIONS INC.

Principal Place of Business Mailing Address									#WI 4 WHII WWTII	40 111 60 111 06 24		10161 1911 1981
8052 WEST 21ST AVENUE			8052 WEST 21ST AVENUE			}						
HAILEAH FL 33016			HAILEAH FL 33016									
										RITE IN THI	S SPACE	
									f or Qualife	d		
								/1998				
2. Principal Pl	ace of Business		2a. Mailing Address			ŀ	4. FEI Nu		007	-30		plied For
21			26				6	<u>-08</u>	823	227		1 Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certifo	te of Statu	us Desired		\$8.75 A Fee Re	
City & State	 e		City & State				6 Electio	ı Campaio	n Financin	a _	\$5.00	May Be
23			28					and Contr		a 🗆	Added to	, ,
Zip	Соиг		Zip	Cou	ntry	$ ^{\dagger}$	8. This co	poration	owes the c	ırrent year l	ntangible	
24	25		29	30		-		at Property				[]No _
	9. Name and Add	less of Current	Registered Agent				10. Name	and Addre	ess of Nev	Registere	Agent .	
Adlato	. UEDMEO				81 Name							
), HERMES			ļ	82 Street	Ad tres	s (P.O. Box	Number i	s Not Acce	ptable)/	011	- 245
37/3 NW 166TH ST.					3	22	<u> </u>	7. E.		o S1.	HD1. B	209
APT 204					83							,
MIAN	AI BEACH FL 3316	U			84 City Y	7		-0			85 Zip C	cde . A
						/.//	MARIL	i 0e	seh	F !	L <i> 3</i> 2	1/60
11. Pursuant	to the provisions of Se	ectione 607.0502	and 607.1598, Florida Statu Florida, Such change was	tes, the at	ove-named	co pora	ation submits board of o	s this state rectors. I	ement for the hereby acc	ne purpose (of changing its pintment as rec	registered
agent. I a	m familiar with, and a	ept the obligation	ins of Section 607.0505, Flo	rida Statu	ites.	014	(A)) / /			,
SIGNATURE	(X) 81	eculsi	Vine.		HER	שימ	5 8 kg	OK	1+_	<u>1-25</u>	-99	
	Signature typed or printed na				Agent signature	required w			OFC TO (DATE	ND DIDECTO	DC IN 12
12.	D	OFFICERS AND	DIRECTORS	13.		$\overline{}$	ADDITIO	NS/CHAI	IGES 10 C	PERIOEKS F	ND DIRECTO Change	Addition
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NAME STREET ADDRESS					REET ADDRESS							
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NAME				5 2 NA							_ "	_
re-ville				E 2 CT	REET ADDRESS	1						

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 enhant 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 trusted 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.

☐ DELETE

SIGNATURE:

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ Change

☐ Addition

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90104 028 ***150.00