


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P99000069513</b>	
1. Entity Name <b>CARIDAD MUSIC CORPORATION</b>	

Principal Place of Business <b>6500 SW 185TH WAY FORT LAUDERDALE, FL 33332</b>	Mailing Address <b>6500 SW 185TH WAY FORT LAUDERDALE, FL 33332</b>
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04202005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-0938233</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>PEDRE, JOHN A 6500 SW 185TH WAY FORT LAUDERDALE, FL 33332</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PEDRE, JOHN A 6500 SW 185TH WAY FORT LAUDERDALE, FL 333321431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PEDRE, JOHN R 6500 SW 185TH WAY FORT LAUDERDALE, FL 333321431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PEDRE, CATHERINE 6500 SW 185TH WAY FORT LAUDERDALE, FL 333321431
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<p>U000000332422 04/26/05-80057-012 158.75</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like employees.

SIGNATURE: JOHN A. PEDRE *John A. Pedre* 4/21/05 754-434-7328  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #