FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00



PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (9)DOCUMENT # S06440 EXTREMES MUSIC & NEWS, INC. Mailing Address Principal Place of Business



513-515 LINCO MIAMI BEACH		8758 SW 8TH ST. MIAMI FL 33174			3. Date Incorporated or Qualified 10/17/1990	3a. Date of La 05/01	ast Report //1995 Applied For
2. Principal Place	e of Business	2a. Mailing Address			4. FEI Number		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0222911 5. Certificate of Status Desired		3.75 Additional Fee Required	
City & State		Oity & State			Election Campaign Financing Trust Fund Contribution		55.00 May Be Added to Fees
Zip	Country 25	Ζφ 29	Gount 30	try		□ No	
\$	9. Name and Address of Curren				10. Name and Address of New R	tegistered Age	<u>nt</u>
	9. Halle and Addices of College		8	Name			
MIRABAL, MARIO T				32 Street Add	ddress (P.O. Box Number is Not Acceptable)		
4120 S.W MIAMI FL	V. 124TH AVENUE		[1	33			
MIMMI FL	. 00110		1	84 City		FI	5 Zip Code
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12.	OFFICERS AN		13.		ADDITIONS/GHANGED TO OT		nange Addition
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NAME STREET ADDRESS	MIRABAL, MARIO JR 1250 WEAR AVE., #25		13511	HEE! ACORESS			
CITY - ST - ZIP	MIAMI BEACH FL 33139			Y - ST - ZIP		П	hange Addition
TITLE	SD DELETE		2 1 TI 2 2 NA	1	,		
NAME	MIRABAL, MARIO			REET ADDRESS			
STREET ADDRESS	4120 S.W. 124TH AVE.			TY ST ZIP			
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NAME			3 ? NA	I			
STREET ADDRESS				TREET ADDRESS			
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TITLE .		<u></u>	42 N	AME			
NAME STREET ADDRESS			438	IREET ADDRESS			
CITY-ST-ZIP				ITY - ST - Z:P			Change Addition
TITLE		DELETE	5 1 T			LJ	energy [] market
NAME			52N				
STREET ADDRESS				TREE1 ADDRESS			
CHTY - ST - ZIP		T DELETE	54C	HTLE			Change
TITLE			62 N				
NAME				STREET ADDRESS			
STREET ADDRESS				DiTY - ST - ZIP			
CITY, ST-7IP	1				Caston 1:	10.07(2)(b) Florid	la Statutes I further

14. It do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.30-96 227-2120