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

FILED Mar 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # (3)HOMBRE DEL MUNDO MUSIC, INC. Principal Place of Business Mailing Address 6157 NW 167 ST 6157 NW 167 ST STE F811 **STE F911** MIAMI FL 33015 DO NOT WRITE IN THIS SPACE MIAMI FL 33015 3. Date Incorporated or Qualified 03/18/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 65-0260798 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žip Country Zip Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. **Y**es ☐ No 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CRANE, ROBERT V. 6157 NW 167 ST Street Address (P.O. Box Number is Not Acceptable) STE F911 83 MIAM) FL 33015 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 with, 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, any accept the appointment as registered agent. I am familiar with, any accept the appointment as registered agent. SIGNATURE 4 ristered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE CRANE, ROBERT V. NAME 1.2 NAME 6157 NW 167 ST STE F911 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition Change TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 City-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE

Nortal annual report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an paceiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment with an address. Block 12 or Block 13 if changed, or on 1 2/2/1/90

6.2 NAME

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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in Section 119.07(3)(ii), Florida Sta

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP