## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** May 01, 2006 08:00 Al

1. Entity Nar	IMENT # S39553 THE NUSIC PUBLISHING, INC.				Sec	retary of State
Principal Pla	ice of Business	Aailing Address				
420 JEFFER		420 JEFFERSON AVENUE Miami Beach, FL 33139 L	IS			
			- <del> </del>			
DO NOT WRITE IN THIS SPA			<b>~</b> =	01042006	No Chg-P	CR2E034 (11/05)
Į <b>L</b>	DO NOT WRITE I	N THIS SPA	CE	4. FEI Numb		Applied For Not Applicable
					of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current Regi	stered Agent				
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE., STE. 3000 MIAMI, FL 33131			DO NOT WRITE IN THIS SPACE			
the obliga	e named entity submits this statement for the atlans of registered agent.	purpose of changing its registere	ed office or register	red agent, or bo	th, in the State of Flori	da. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	al applicable. (NOTE Registere	d Agent signature required	l when reinstating)		DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00				.00 May Be ed to Fees		
10.	OFFICERS AND DIRE	CTORS	<u> </u>			
TITLE	DC					
NAME STREET ADDRESS	ESTEFAN, EMILIO JR 420 JEFFERSON AVENUE					
CITY-ST-ZIP	MIAMI BEACH, FL 33139					
TITLE	VSTD				UQQQQQ5	56476 30010-016 150.00
NAME STREET ADDRESS	ESTEFAN, GLORIA M 420 JEFFERSON AVENUE				0001100000	MOTO-019 120.00
CITY-ST-ZIP	MIAMI BEACH, FL 33139					
TITLE	Р					
NAME STREET ADDRESS	AMADEO, FRANK 420 JEFFERSON AVENUE					
CITY-ST-ZIP	MIAMI BEACH, FL 33139			DO	NOT WI	RITE
TITLE			· ·	161 *	rille en	AOF

## IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or parallel chamter with an address, with all other like empowered.

SIGNATURE

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Frank Amadeo,

2/21/2006

(305)695-7000

Daytima Phone #