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

**PROFIT CORPORATION** ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(7)

DISTRIBUIDORA NACIONAL DE DISCOS, INC.

**FILED** Mar 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					} 1951 01101 1000 1100 1100 1010 1010 101				
5956 W 16 AVE. 5956 W 16 AVE. HIALEAH FL 33012									
MALCAN PL AAVIZ		HIALEAH FL 33012				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
						10/08/1992			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	A	oplied For	
21		26				65-0366143 Not Ar		ot Applicable	
Suite, Ar	pt. #. etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired \$8.75 Additional			
22 27						S. Continuate of Olates Desired	Fee R	equired	
City & St	tate	City & State	}			Election Campaign Financing		May Be	
23	28					Trust Fund Contribution		to Fees	
Zip	Country	Zip	<del></del> -	intry		8. This corporation owes or has paid the co			
24	25 9. Name and Address of Curr	1-1	30		·····	Personal Property Tax due June 30.  10. Name and Address of New Registered		No No	
	<del></del>	ент медуателел удецт		B1	Name	10. Maine and Address of New Registered	- Agent		
GONZALEZ, DARIO				اتــّا					
5958 W 16 AVE. HIALEAH FL 33012				B2	Street Adde	ress (P.O. Box Number is Not Acceptable)			
				B3					
				~					
				В4	City	FI	<b>85</b> Zip	Code	
11. Pursua	nt to the provisions of Sections 607.0	502 and 607 1508, Florida Statute	s, the a	bove	e-named corp	• •	of changing i	ts registered	
office o agent	or registered agent, or both, in the Sta I am familiar with, and accept the obl	ite of Florida. Such change was ai igations of, Section 607.0505, Flor	uthorize rida Stal	d by lutes	the corporal	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	pointment as	registered	
SIGNATURI	E	·							
	Signature, typed or printed name of registered i		Fingistore	d Age	nt signature requi	red when reinstating) DATE			
12.		AND DIRECTORS			r	ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	ODNIZALEZ AIDA N	☐ DETELE	1.1 TITLE				Change	Addition	
NAME	GONZALEZ, AIDA N.		1.2 NAME		1				
STREET ADDRES	·- I				ADDRESS				
CITY-ST-ZIP	HIALEAH FL 33012	Libriere		TY-\$	T-ZIP		Change	Addition	
TITLE	1 -	☐ DELETE	2.1 TI				∟ ∪nange	☐ Madition	
NAME	ORUNA, ARLENE		2.2 NAME						
STREET ADDRES			2.3 STREE						
CITY-ST-ZIP	HIALEAH FL 33012	[] onere	2. 4 CHY		ST-ZIP		Change	Addition	
TITLE	ORUNA, PEDRO	☐ DELETE	3.1 TITLE 3.2 NAME		ŀ		∟ ∪ uange	☐) Magitian	
NAME	F0F0 144 40 41 F		•		*DDDCCC				
STREET ADDRES	HIALEAH FL 33012		3.3 STREE						
CITY-ST-ZIP TITLE	DS	DELETE	3.4. CITY -		II-ZIP		Change	Addition	
	GONZALEZ, DARIO	_ bittle	4.1 HILE				Unange	LI Addition	
NAME CYDEET ADODES			- 6		**************************************				
STREET ADDRES	HIALEAH FL 33012				ADDRESS				
CITY-ST-ZIP	THALEATT FL 33012	DELETE	4.4 CITY-1		T-ZIP		Change	Addition	
TITLE	1	C OFFER	5.1 TITLE 5.2 NAME					Audition	
NAME									
STREET ADDRES	is				ADORESS	•			
CITY-ST-ZIP	<del> </del>	☐ DELETE		TY - \$1	T-ZIP		Change	Addition	
TITLE		L Dittell	6.1 TI				L. Unange	TTI Madition	
NAME			6.2 N/						
STREET ADDRES	SS		6.3 ST	REET	ADDRESS				
CITY - ST - ZIP	1		6.4 CI	TY - S1	T-ZNP				

14. Thereby 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 supplicated and indicated on this 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 of the