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

PROFIT
CORPORATION
ANNUAL REPORT
1998

DOCUMENT #
1. Corporation Name
PACKSTAGE DECORE



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED Feb 10 1998 8:00am Secretary of State

	1330	( a)				
DOCU 1. Corporatio	MENT #	V73333	(9)			
BACKSTAGE RECORDS, INC.						
					T LOCAL ORIGIN LOCAL CALAD BALLO SILVE SILVE	YA BUBUK BUBUK BUBUK BUBUK BUBUK JOBA
Principal Plac			Mailing Address			
7880 W 20 A	WE		7880 W 20 AVE 43		\	
HIALEAH FL 33016			HIALEAH FL 33016		DO NOT WRITE IN 1	HIS SPACE
US			US		3. Date Incorporated or Qualified	
					10/22/1992	
	lace of Business	OIL HO AUE	2a. Mailing Address	211th Avenue	4. FEI Number	Applied For
21 15 Z   Suite, Apt	WEST	24th AVE	26 7527 WEST Suite, Apt. #, etc.	29111 RIU 101	1	Not Applicable
22 A	#, O.O.		27] A		6. Certificate of Status Desired	Fee Required
City & Stat	0-11		City & State		6. Election Campaign Financing	\$5.00 May Be
23 HA	LEAH	PL_	28 HIALEA	1 14	Trust Fund Contribution	
Zip 24 330		Country	Zip T T T T T T T T T T T T T T T T T T T	- COUNTY NE	8. This corporation owes or has paid th	
24 350	9 Name and	DADE Address of Current	29 330 L/	30 DADE	Personal Property Tax due June 30.  10. Name and Address of New Registe	Yes No
EE			nogiatorou Agent	81 Name	(b) Hame and Address of Hear Hegiste	neu Agent
FERNANDEZ, ROBERT 7880 W 20 AVE						
43				82 Street Ad	Idress (P.O. Box Number is Not Acceptable)	AVE NUE
HIALEAH FL 33018				83 6 13	rte A	
				84 City ( )	LIE A	
						FL   330112
11. Pursuant office or r	to the provisions of	of Sections 607.0502 or both, in the State of	and 607.1508, Florida Statut Florida, Such change was :	es, the above-named co	orporation submits this statement for the purporation's board of directors. I hereby accept the	se of changing its registered
agent. I a	m tamilia, with a	nd accept the obligati	ons of, Section 607.0505, Fl	orida Statutes.	0 - 0	n 00
SIGNATURE	IMM IN	ted name of registered agents	and tile it an assemble (NOT	Fiegistered Agent signature rec	wilrad whon reinclation)	X -7 8
12.	Signature, types within	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P		DELETE	11 TITLE		☐ Change ☐ Addition
NAME	FERNANDE			1.2 NAME		
STREET ADDRESS	540 SW 182			1.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE VP	PINES FL	M proces	1.4 CITY - ST - ZIP		
TITLE	TORMO, ISA	MC	DELETE	2.1 TITLE		Change Addition
NAME		MO MOTH STREET		2.2 NAME		
STREET ADDRESS '	FT. LAUDER			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE			DELETE	3 1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3 3 STREET ADDRESS		
CITY-ST-ZIP				3 4. City-ST-ZIP		
TITLE			☐ DELETE	4.1 THTLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			precie	5.2 NAME		Frid Colorado Print Catacocción
STREET ADDRESS				5 3 STREET ADDRESS		
CITY-ST-ZIP				5.4 CITY-ST-ZIP		\
TITLE	·		DELETE	6 1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS	1			63 STREET ADDRESS		
CITY-ST-ZIP		<del></del>	N. 70	64 CITY-ST-ZIP	C-12-140 07/0/2 F1-14- C-12-14	
14. I hereby o	certify that the info	rmation supplied with	this filing does not qualify for	r the exemption stated	in Section 119.07(3)(i), Florida Statutes. I furth	er certify that the information

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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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, of on an attachment with an address.

SIGNATURE: WITH THE

2-2-98

R2E034 (10/97)