

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001860

Entity Name: VILLAGE SQUARE MUSIC INC.

FILED
Feb 01, 2010
Secretary of State

Current Principal Place of Business:

2050 NORTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483

New Principal Place of Business:

200 NE 2ND AVNUE
101
DELRAY BEACH, FL 33444

Current Mailing Address:

2050 NORTH FEDERAL HIGHWAY
DELRAY BEACH, FL 33483

New Mailing Address:

200 NE 2ND AVENUE
101
DELRAY BEACH, FL 33444

FEI Number: 20-5960330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANNON, BILL
600 WRIGHT WAY
GULF STREAM, FL 33483 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CHRM
Name: SHANNON, WILLIAM
Address: 4300 BOUL DE MAISONNEUVE APT 829
City-St-Zip: MONTREAL, QC H3Z1K8 CA

Title: P
Name: SHANNON, WILLIAM
Address: 4300 BOUL DE MAISONNEUVE APT 829
City-St-Zip: MONTREAL, QC H3Z 1K8 CA

Title: VCHR
Name: SHANNON, MICHAEL
Address: 2860 HILL PARK RD.
City-St-Zip: MONTREAL QC H34177 CANADA,

Title: V
Name: SHANNON, MICHAEL
Address: 2860 HILL PARK RD.
City-St-Zip: MONTREAL QC H34177 CANADA,

Title: S
Name: KYRTATAS, MARIA
Address: 5524 ST PATRICK SUITE 330
City-St-Zip: MONTREAL, QC H4E 1A8 CA

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIA KYRTATAS

SECR

02/01/2010

Electronic Signature of Signing Officer or Director

Date