## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000006165

Title:

Name:

Address:

City-St-Zip:

Entity Name: MUSIGALS GROUP, INC.

FILED Apr 08, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 17288 BOCA CLUB BLVD 2008 BOCA RATON, FL 33487 **New Mailing Address: Current Mailing Address:** 17288 BOCA CLUB BLVD #2008 BOCA RATON, FL 33487 FEI Number: 65-1018323 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WEISS, ANN 17288 BOCA CLUB BLVD #2008 BOCA RATON, FL 33487 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WEISS, ANN Name: Name: 17288 BOCA CLUB BLVD #2008 Address: Address: City-St-Zip: BOCA RATON, FL 33487 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: GOFFREDO, ANN Name: Address: 21017 SHADY VISTA Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: () Delete Title: () Change () Addition MILLER, ANTONIA Name: Name: 10336 GREENBRIAR CT Address: Address: City-St-Zip: BOCA RATON, FL 33498 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: ETTINGER, SALLY Name: Address: 9141-A SW 22ND ST Address: City-St-Zip: BOCA RATON, FL 33433 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ANN WEISS PT 04/08/2007

() Delete

BOYNTON BEACH, FL 33437

ORBACH, DEBORAH

10039 53RD WAY

() Change () Addition