2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000007201

Entity Name: ALL STAR MUSIC FESTIVAL, INC.

FILED Aug 16, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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523 W COLONIAL DR 10 NORTH PARK AVE ORLANDO, FL 32804

SUITE B

APOPKA, FL 32703

Current Mailing Address: New Mailing Address:

523 W COLONIAL DR 10 NORTH PARK AVE ORLANDO, FL 32804 SUITE B APOPKA, FL 32703

FEI Number: 59-3753908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MALONE, MICHAEL M 523 W CÓLONIAL DR ORLANDO, FL 32804 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: MICHAEL M MILLER

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete SHULER, JAMES M JR SHULER, JAMES M JR Name: Name:

Address: 7548 MUNICIPAL DR Address: 2295 S. HIAWASSEE RD #301 City-St-Zip: ORLANDO, FL 32819 City-St-Zip: ORLANDO, FL 32835

Title: () Delete Title: () Change () Addition

Name: MALONE, J. MICHAEL Name: Address: 523 W COLONIAL DR Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip:

Title: () Delete Title: (X) Change () Addition DAVIS, MICHAEL J Name: COOPER, JOSEPH Name:

3786 A SILVER STAR ROAD 438 N DILLARD STREET Address: Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: WINTER GARDEN, FL 34787

Title: () Delete Title: () Change () Addition

Name: FINIZIO, THOMAS A SR Name: 715 N FERNCREEK AVE Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: JAMES M SHULER D 08/16/2005