## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000085405

City-St-Zip:

FORT LAUDERDALE, FL 33326

FILED Apr 30, 2006 Secretary of State

Entity Na	me: TIMELY	MUSICALS, INC.			
Current P	rincipal Plac	e of Business:	New Principal Pla	New Principal Place of Business:	
POST OFFICE BOX 266255 WESTON, FL 33326				492 CARRINGTON LANE WESTON, FL 33326	
Current N	lailing Addre	ss:	New Mailing Add	New Mailing Address:	
POST OFFICE BOX 266255 WESTON, FL 33326				492 CARRINGTON LANE WESTON, FL 33326	
FEI Number	: 65-1086244	FEI Number Applied For()	FEI Number Not Applicable (	) Certificate of Status Desired ( )	
Name and	l Address of	Current Registered Agent	: Name and Addres	Name and Address of New Registered Agent:	
2 SOUTH SUITE 293	ERBERT M ES BISCAYNE B 30 33131 US			BRAUN, ROBIN 492 CARRINGTON LANE WESTON, FL 33326 US	
	e named entity e of Florida.	submits this statement for t	he purpose of changing its regist	tered office or registered agent, or both,	
SIGNATUI	RE: ROBIN E	BRAUN		04/30/2006	
	Electro	nic Signature of Registered	Agent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICER	S AND DIREC	CTORS:	ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( BRAUN, ROBI POST OFFICE WESTON, FL	BOX 266255	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( BRAUN, JOSH POST OFFICE WESTON, FL	BOX 266255	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	P ( BRAUN, ROBI 492 CARRING		Title: Name: Address:	( ) Change ( ) Addition	

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: ROBIN BRAUN P 04/30/2006