2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

May 03, 2006 8:00 am Secretary of State 05-03-2006 90258 014 ***163.75 **DOCUMENT # P01000012750** 1. Entity Name DASHANTY MUSIC, INC. 60035898 Principal Place of Business Mailing Address 5716 RODMAN ST. 5716 RODMAN ST HOLLYWOOD, FL 33023 HOLLYWOOD, FL 33023 2. Principal Place of Business Mailing Address MCNAB RD Suite, Apt. #, etc. Suite, Apt. #, etc. 04292006 Chg-P CR2E034 (11/05) #26 Applied For City & State City & State 4. FEI Number 13CH 65-1075901 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent... 6. Name and Address of Current Registered Agent POWELL, DAHALIA Street Address (P.O. Box Number is Not Acceptable) 2642 NE 212 TER MIAMI, FL 33180 8. 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. the obligations of registered agent N Q9 towell ・エト SIGNATURE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10, 11. Change TITLE ☐ Delete TITLE BAKER, HOMESLEY H NAME NAME BAKER, Homesley H 2642 NE 212 TER STREET ADDRESS 4421 IN MCNAB STREET ADORESS 120AD #24 MIAMI, FL 33180 CITY-ST-ZIP CITY-ST-ZIP BCH, FL 33069 20mpano MA TITLE PDM ☐ Defete TITLE Addition POWELL, DAHALIA NAME NAME POWELL, STREET ADDRESS 2642 NE 212 TER STREET ADDRESS MIAMI, FL 33180 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if charged, or on an attachment with an address, with all other like empowered.

FILED