2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000052276

City-St-Zip:

HALLANDALE, FL 33009

Entity Name: CRAZY BIRD MUSIC, INC.

FILED Mar 20, 2008 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
	KVIEW DRIVE		3551 N.E.	3551 N.E. 169 STREET		
HALLAND	ALE, FL 33009	9	#207 NORTH M	#207 NORTH MIAMI BEACH, FL 33160		
Current N	lailing Addres	s:	New Maili	New Mailing Address:		
	KVIEW DRIVE ALE, FL 3300	9	3551 N.E. #207	169 STREET		
			NORTH M	AMI BEACH,	FL 33160	
FEI Number	: 65-1111410	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	d Address of C	Surrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
ELLIS, FERN 2751 PARKVIEW DRIVE HALLANDALE, FL 33009 US			3551 Ń.E. #207	ELLIS, FERN 3551 N.E. 169 STREET #207 NORTH MIAMI BEACH, FL 33160 US		
	e named entity s e of Florida.	submits this statement for the	purpose of changing i	ts registered o	office or registered agent, or both	
SIGNATUI	RE:			03/20/2008		
	Electron	ic Signature of Registered Ag	gent		Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	VP () ELLIS, SHEPHI 6010 CHRYSTE HOUSTON, TX	ELLE LANE	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	T () ELLIS, JUNE D 31 WOODLAND HARTFORD, C) ST	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	S () FIGUEROA, SA 2751 PARKVIE HALLANDALE,	W DR	Title: Name: Address: City-St-Zip:	ELLIS, HERBE 3551 N.E. 169		
Title: Name: Address:	P () ELLIS, FERN 2751 PARKVIE	Delete W DRIVE	Title: Name: Address:	P (X ELLIS, FERN 3551 N.E. 169) Change()Addition ST. #207	

I hereby certify that the information supplied with this filing does not qualify 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: NORTH MIAMI BEACH, FL 33160

SIGNATURE: FERN ELLIS PRES 03/20/2008