2006 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 16, 2006 8:00 am **Secretary of State DOCUMENT # P01000104014** 03-16-2006 90246 037 ***150.00 1. Entity Name STEWART MUSIC CENTER, INC. Principal Place of Business Mailing Address 2600 US/SOUTH 490 5216 2600 US/SOUTH-490 5 R 16 SUITE 13 SUITE 13 ST AUGUSTINE, FL 32086- 32-08 4 ST AUGUSTINE, FL 32006 3 228 4 02072006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3757281 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent STEWART, ROBERT B DO NOT WRITE 490 B S.R.16 2600 US 1 SOUTH SAINT AUGUSTINE, FL 32084 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE STEWART, ROBERT B NAME STREET ADDRESS 6 DOUGLAS AVE SAINT AUGUSTINE, FL 32084 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

FILED

12. Thereby 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 changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP