


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2008 08:00 AM
Secretary of State

| | |
|---------------------------------|---|
| DOCUMENT # P03000060286 |  |
| 1. Entity Name MUSITECH INC. | |

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|---|---|
| Principal Place of Business 7512 DR. PHILLIPS BLVD., SUITE 50-283 ORLANDO, FL 32819 US | Mailing Address 7512 DR. PHILLIPS BLVD., SUITE 50-283 ORLANDO, FL 32819 US |
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DO NOT WRITE IN THIS SPACE



04292008 No Chg-P CR2E034 (11/05)

| | |
|--|---------------------------------------|
| 4. FEI Number 11-3691122 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

SLATER, CHRISTIAN V
7512 DR. PHILLIPS BLVD.,
SUITE 50-283
ORLANDO, FL 32819

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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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000946051
05/30/08-80032-025 158.75

| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRES SLATER, CHRISTIAN V 7512 DR. PHILLIPS BLVD., ORLANDO, FL 32819 |
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Christian V. Slater Christian V. Slater 4-28-08 800-411-1618
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #