2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000063655

FILED Apr 18, 2006 Secretary of State

Entity Name	: PALMI	BEACH PIANO CO	MPANY					
Current Principal Place of Business:				New Prin	New Principal Place of Business:			
401 MAPLEV	VOOD DF	RIVE						
SUITE 16 JUPITER, FL	33458	US						
Current Mailing Address:				New Mail	New Mailing Address:			
401 MAPLEW SUITE 16	VOOD DF	RIVE						
JUPITER, FL	33458	US						
FEI Number: 20	-1019899	FEI Number Ap	plied For() Fi	El Number Not App	olicable ()	Certificate of	Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
FONSECA, C 401 MAPLEW SUITE 16 JUPITER, FL	VOOD DF	RIVE						
The above na in the State of		ty submits this stat	ement for the purpo	ose of changing	its registered	d office or regist	ered agent, or both,	
SIGNATURE:	:							
Electronic Signature of Registered Agent					Date			
Election Campa	aign Financ	cing Trust Fund Cont	ribution ().					
OFFICERS AND DIRECTORS:				ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Name: F	ONSECA, (() Delete OSWALDO		Title: Name:	FONSECA,	(X) Change () Ad OSWALDO		

City-St-Zip: JUPITER, FL 33458 US City-St-Zip: JUPITER, FL 33458 US () Delete Title: (X) Change () Addition FONSECA, VICTORIA FONSECA, VICTORIA Name: Name: Address: 401 MAPLEWOOD DRIVE Address: 401 MAPLEWOOD DRIVE SUITE 16 JUPITER, FL 33458 US JUPITER, FL 33458 US City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete Name: FONSECA, JOSEFINA Name: FONSECA, JOSEFINA 401 MAPLEWOOD DRIVE Address: 401 MAPLEWOOD DRIVE SUITE 16 Address: City-St-Zip: JUPITER, FL 33458 US City-St-Zip: JUPITER, FL 33458 US Title: CEO () Delete Title: CEO (X) Change () Addition FONSECA, JAIME FONSECA, JAIME Name: Name: 401 MAPLEWOOD DRIVE 401 MAPLEWOOD DRIVE SUITE 16 Address: Address: JUPITER, FL 33458 US JUPITER, FL 33458 US City-St-Zip: City-St-Zip:

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.

SIGNATURE: OSWALDO FONSECA Ρ 04/18/2006