


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 8:00 am
Secretary of State

01-30-2006 90055 006 ***150.75

DOCUMENT # P04000099123	
1. Entity Name G.I.E.L. MUSIC, INC.	

Principal Place of Business 1271 NW 137TH AVENUE PEMBROKE PINES, FL 33028 US	Mailing Address 1271 NW 137TH AVENUE PEMBROKE PINES, FL 33028 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01232006 Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent BRAMKER, CARLTON 2211 NW 94TH AVE HOLLYWOOD, FL 33024	
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7. Name and Address of New Registered Agent	
Name	CARLTON Branker
Street Address (P.O. Box Number is Not Acceptable)	
1271 NW 137 Ave	
City	Pembroke Pine FL
Zip Code	33028

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	Carlton Branker
(NOTE: Registered Agent signature required when reinstating)	
DATE 1/23/06	

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	D <input type="checkbox"/> Delete
NAME	BRANKER, CARLSYLE
STREET ADDRESS	1271 NW 137TH AVENUE
CITY-ST-ZIP	PEMBROKE PINES, FL 33028
TITLE	D <input type="checkbox"/> Delete
NAME	BRANKER, VICTORIA
STREET ADDRESS	1271 NW 137TH AVENUE
CITY-ST-ZIP	PEMBROKE PINES, FL 33028
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Joi Sherce Branker
STREET ADDRESS	1271 NW 137 Ave
CITY-ST-ZIP	Pembroke Pine, FL 33028
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Victoria Branker	Date: 1/23/06	Daytime Phone #: 9544433172
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		