


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 28, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000088554 1. Entity Name DAYSAH MUSIC, INC.	
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Principal Place of Business 680 NW 72 AVE PLANTATION, FL 33317	Mailing Address P O BOX 17474 PLANTATION, FL 33318
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05022007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3033110	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent FORD, DESSALINES 680 NW 72 AVE PLANTATION, FL 33317
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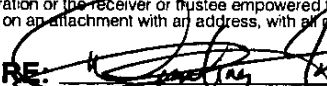
DO NOT WRITE IN THIS SPACE

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.	U000000772792 08/28/07-80004-003 150.00 DATE
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	

FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORD, DESSALINES 680 NW 72 AVE PLANTATION, FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FORD, LISA R 680 NW 72 AVE PLANTATION, FL 33317
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 officers empowered.	SIGNATURE:  Dessalines Ford <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	8/21/07 305-606-2512 <small>Date Daytime Phone #</small>
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