2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# P05000097868

Entity Name: NICK'S PIANO SHOWROOM, INC.

Current Principal Place of Business:

180 TRIPLE DIAMOND BLVD.
B-4
NORTH VENICE, FL 34275

New Principal Place of Business:

Current Mailing Address:

429 MANNS HARBOR DRIVE
APOLLO BEACH, FL 33572

New Mailing Address:

180 TRIPLE DIAMOND BLVD.
B-4
NORTH VENICE, FL 34275

FEI Number: 20-3127724 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAUEL, NICHOLAS E
429 MANNS HARBOR DRIVE
APOLLO BEACH, FL 33572 US

Name and Address of New Registered Agent:

MAUEL, NICHOLAS E
180 TRIPLE DIAMOND BLVD.
B-4
NORTH VENICE, FL 34275 US

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.

SIGNATURE: 05/02/2007
Electronic Signature of Registered Agent — Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: MAUEL, NICHOLAS E
Address: 429 MANNS HARBOR DRIVE
City-St-Zip: APOLLO BEACH, FL 33572

Title: S ( ) Delete
Name: MAUEL, NICHOLAS E
Address: 429 MANNS HARBOR DRIVE
City-St-Zip: APOLLO BEACH, FL 33572

Title: T ( ) Delete
Name: MAUEL, NICHOLAS E
Address: 429 MANNS HARBOR DRIVE
City-St-Zip: APOLLO BEACH, FL 33572

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: MAUEL, NICHOLAS E
Address: 11846 GRANITE WOODS LOOP
City-St-Zip: VENICE, FL 34292

Title: S (X) Change ( ) Addition
Name: MAUEL, NICHOLAS E
Address: 11846 GRANITE WOODS LOOP
City-St-Zip: VENICE, FL 34292

Title: T (X) Change ( ) Addition
Name: MAUEL, NICHOLAS E
Address: 11846 GRANITE WOODS LOOP
City-St-Zip: VENICE, FL 34292

I hereby certify that the information supplied with this filing does not qualify 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: NICHOLAS E. MAUEL PRES 05/02/2007
Electronic Signature of Signing Officer or Director — Date