

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000150811

FILED
Apr 30, 2009
Secretary of State

Entity Name: SKINNY CROW MUSIC, INC.

Current Principal Place of Business:

11514 SW 127TH CT.
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

11514 SW 127TH CT.
MIAMI, FL 33186

New Mailing Address:

FEI Number: 04-3833643 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, DERYL P
11514 SW 127TH CT.
MIAMI, FL 33186 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEON, DERYL P
Address: 11514 SW 127TH CT.
City-St-Zip: MIAMI, FL 33186

Title: VD () Delete
Name: ARELLINI, MICHEL
Address: 11514 SW 127TH CT.
City-St-Zip: MIAMI, FL 33186

Title: VD (X) Delete
Name: JIMENEZ, PABLO
Address: 1730 NE 140 STREET
City-St-Zip: NORTH MIAMI, FL 33181

Title: VD () Delete
Name: LASTAYO, JORGE V
Address: 7713 NORTH KENDALL DRIVE, UNIT A-112
City-St-Zip: MIAMI, FL 33156

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DERYL LEON

PD

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date