## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P06000080029

Entity Name: PRECISION MUSICAL PRODUCTS, INC.

FILED Oct 12, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1919 VAN BUREN ST 3960 SW 72 DR HOLLYWOOD, FL 33020 DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

1919 VAN BUREN ST 3960 SW 72 DR HOLLYWOOD, FL 33020 DAVIE, FL 33314

FEI Number: 20-5126447 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVY, LEHRMANN
1919 VAN BUREN ST
HOLLYWOOD, FL 33020 US
LEVY, LEHRMANN
3960 SW 72 DR
DVAIE, FL 33314 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: LEHRMANN LEVY 10/12/2007

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: PD (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Ch

 Name:
 LEVY, LEHRMANN
 Name:
 LEVY, LEHRMANN

 Address:
 1919 VAN BUREN ST
 Address:
 3960 SW 72 DR

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:
 DAVIE, FL 33314

Title: VPD () Delete Title: VPD (X) Change () Addition

 Name:
 LEVY, STACEY
 Name:
 LEVY, STACEY

 Address:
 1919 VAN BUREN ST
 Address:
 3960 SW 72 DR

 City-St-Zip:
 HOLLYWOOD, FL 33020
 City-St-Zip:
 DAVIE, FL 33314

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: LEHRMANN LEVY PD 10/12/2007