2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P30628

FILED Nov 12, 2004 Secretary of State

D 0 0 0 10		.020		ocorciary or oracc	
Entity Na	me: QRS MU	SIC INC			
Linery Ive	me. gromo	010 1140.			
Current Principal Place of Business:			New Principal Place of Business:		
2011 SEW NAPLES, I					
Current Mailing Address:			New Mailing Address:		
2011 SEW NAPLES,		JS			
FEI Number	: 36-3683315	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:		
DOLAN, R 2011 SEW NAPLES, I		JS	JONES, ANN 2011 SEWARD NAPLES, FL 34109	US	
The above in the State	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE: ANN JOI	NES		11/12/2004	
	Electro	nic Signature of Registered Age	ent	Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CD (DOLAN, RICHA 2011 SEWARE NAPLES, FL 3)	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST (JONES, ANN 2011 SEWARE NAPLES, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COO (BERKMAN, RO 1026 NIAGARA BUFFALO, N		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	P (DOLAN, THOM) Delete AS R	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: ANN A. JONES T 11/12/2004

2011 SEWARD AVE

NAPLES, FL 34109

Address:

City-St-Zip: