2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000023536

City-St-Zip:

MIAMI LAKES, FL 33014

FILED Feb 21, 2006 Secretary of State

Entity Name: MSI MUSIC CORP.					
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
14620 NW MIAMI LAK	60TH AVE. ES, FL 33014	2811 US			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
14620 NW MIAMI LAK	60TH AVE. ES, FL 33014	2811 US			
FEI Number:	65-0481551	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
CFRA, LLC, CORPORATE CENTER THREE AT INT'L PLAZA 4221 W. BOY SCOUT BLVD, 10TH FLOOR TAMPA, FL 336075736 US			4221 W. BOY SCOUT E	CFRA, LLC CORPORATE CENTER THREE AT INT'L PLAZA 4221 W. BOY SCOUT BLVD, 10TH FLOOR TAMPA, FL 336075736 US	
The above in the State		submits this statement for the pu	rpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				02/21/2006	
Electronic Signature of Registered Agent			nt	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPS () COLONOMOS, 14620 NW 60T MIAMI LAKES,	H AVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DVPT () COLONOMOS, 14620 NW 60T MIAMI LAKES,	H AVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address:	VP () LEWIN, DAVID 14620 NW 60T		Title: (Name: Address:) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

City-St-Zip:

SIGNATURE: BEN COLONOMOS **PRES** 02/21/2006