2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000037592

MOGULL, PETER

360 EAST 72ND STREET

NEW YORK, NY 10021

Name:

Address:

City-St-Zip:

Entity Name: ARTWORK MUSIC CO., INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4517 PALM BEACH POINT BLVD W. PALM BEACH, FL 334147410 **Current Mailing Address: New Mailing Address:** C/O RENDINE CPA 3544 GOMER ST YORKTOWN MTS, NY 10598 US FEI Number: 65-0597962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MOGULL, IVAN 4517 PALM BEACH POINT BLVD. US WEST PALM BEACH, FL 33414 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition MOGULL, IVAN Name: Name: 4517 PALM BEACH POINT BLVD. Address: Address: City-St-Zip: W. PALM BEACH, FL 334147410 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MOGULL, DAVID Name: 2600 ISLAND BLVD #2903 Address: Address: MIAMI, FL 33160 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MOGULL, MARCIA Name: Name: 4517 PALM BEACH POINT BLVD. Address: Address: City-St-Zip: W. PALM BEACH, FL 334147410 City-St-Zip: Title: () Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: IVAN MOGULL PD 04/30/2004