


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 04, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000037592	
1. Entity Name ARTWORK MUSIC CO., INC.	

Principal Place of Business 4517 PALM BEACH POINT BLVD. W. PALM BEACH, FL 33414-7410	Mailing Address C/O RENDINE CPA 3544 GOMER ST YORKTOWN MTS, NY 10598 US
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03292005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0597962	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  MOGULL, IVAN 4517 PALM BEACH POINT BLVD. WEST PALM BEACH, FL 33414	DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.	

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MOGULL, IVAN 4517 PALM BEACH POINT BLVD. W. PALM BEACH, FL 334147410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MOGULL, DAVID 2600 ISLAND BLVD #2903 MIAMI, FL 33160
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOGULL, MARCIA 4517 PALM BEACH POINT BLVD. W. PALM BEACH, FL 334147410
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOGULL, PETER 360 EAST 72ND STREET NEW YORK, NY 10021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

~~04/04/05-80072-003 150.00~~

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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ivan Mogull 3/25/05 561-795-9661

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #