

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Martham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # D 95000040347

1. Corporation Name

MUSICAL TALENT, INC.

Principal Place of Business

1221 BRICKELL AVE. Suite # 172D
MIAMI, FL 33131

Mailing Address

APPROVED
AND
FILED

98 APR 27 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 96-98

2. Principal Office of the Agent

21. Date App'd. to Agt.

22. City & State

23. Zip | Country

24. Zip | Country

26. Mailing Address

26. Suite Agt. #, etc

27. City & State

28. Zip | Country

29. Zip | Country

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified | 3a. Date of Last Report

05/16/95

1995

4. FEE Number

65-0588771

Action Taken
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for outstanding tax under s. 1991.03
Florida Statutes Yes No

10. Name and Address of New Registered Agent

81. Name	LUIS, G. VICEDO		
82. Street Address (P.O. Box Number Is Not Acceptable)	1221 Brickell Ave. Suite #1721		
83. City	MIAMI,		
84. Zip	FL 33131		

11. Pursuant to the provisions of Sections 007.0502 and 007.1500, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent for the corporation and accept the obligations of Section 007.0500, Florida Statutes.

LUIS G. VICEDO

SIGNATURE

12. OFFICES AND DIRECTORS	<input type="checkbox"/> DELETE	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
P/S/T & D	<input type="checkbox"/> DELETE	11. NAME
1221 Brickell Ave. Suite 1720	<input type="checkbox"/> DELETE	12. NAME
Miami, Fl. 33131	<input type="checkbox"/> DELETE	13. STREET ADDRESS
CITY ST ZIP	<input type="checkbox"/> DELETE	14. CITY ST ZIP
NAME	<input type="checkbox"/> DELETE	21. NAME
SUPPL ADDRESS	<input type="checkbox"/> DELETE	22. NAME
CITY ST ZIP	<input type="checkbox"/> DELETE	23. STREET ADDRESS
NAME	<input type="checkbox"/> DELETE	24. CITY ST ZIP
OFFICE ADDRESS	<input type="checkbox"/> DELETE	31. NAME
CITY ST ZIP	<input type="checkbox"/> DELETE	32. NAME
NAME	<input type="checkbox"/> DELETE	41. STREET ADDRESS
CITY ST ZIP	<input type="checkbox"/> DELETE	42. NAME
NAME	<input type="checkbox"/> DELETE	43. STREET ADDRESS
SUPPL ADDRESS	<input type="checkbox"/> DELETE	44. CITY ST ZIP
CITY ST ZIP	<input type="checkbox"/> DELETE	51. NAME
NAME	<input type="checkbox"/> DELETE	52. NAME
SUPPL ADDRESS	<input type="checkbox"/> DELETE	53. STREET ADDRESS
CITY ST ZIP	<input type="checkbox"/> DELETE	54. CITY ST ZIP
NAME	<input type="checkbox"/> DELETE	61. NAME
SUPPL ADDRESS	<input type="checkbox"/> DELETE	62. NAME
CITY ST ZIP	<input type="checkbox"/> DELETE	63. STREET ADDRESS

12. I acknowledge that information furnished with this filing does not qualify for the exemption stated in Section 11.03(3)(g), Florida Statutes. I further certify that all information contained on the annual report or supplemental report is true and accurate and that my signature shall have the same legal effect as a handwritten signature. I am the officer or director of the company whose corporation or partnership used to incorporate or do business in Florida. I am the person named on the original incorporation papers or I am the officer or director of the corporation or partnership incorporated in Florida.

SIGNATURE:

LUIS G. VICEDO

04/24/98

305-373-0419