


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 AUG 18 PM 1:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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PROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P96000021396 (2) 1. Corporation Name THE PIANIST, INC.	



Principal Place of Business 11165 N.W. 7TH ST. #203 MIAMI FL 33172-3000	Mailing Address 11165 N.W. 7TH ST. #203 MIAMI FL 33172-3000
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4330 SW 11ST		2a. Mailing Address 26 P.O. BOX 2406		3. Date Incorporated or Qualified 03/08/1996		3a. Date of Last Report	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number 650650014		Applied For Not Applicable	
23 City & State CORAL GABLES		28 City & State MIAMI FL		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
24 Zip 33134		25 Country		29 Zip 33144		30 Country	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>				\$5.00 May Be Added to Fees			
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							

9. Name and Address of Current Registered Agent

~~WALKER, SANDRA A
11165 N.W. 7TH STREET
#203
MIAMI FL 33172-3000~~

10. Name and Address of New Registered Agent

81 Name **BRL BUSINESS LEGAL**
 82 Street Address (P.O. Box Number is Not Acceptable) **191 NE 3RD ST 3 FLOOR**
 83
 84 City **MIAMI** FL 85 Zip Code **33132**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Dulce Olmos Bozso* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	P OLMOS, DULCE M 11165 N.W. 7TH ST., #203 MIAMI FL 33172-3000	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		1.3 STREET ADDRESS	4330 SW 11ST
		1.4 CITY-ST-ZIP	CORAL GABLES FL 33134
		2.1 TITLE	
		2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	900002271516-00
		3.2 NAME	-08/19/97--01075--001
		3.3 STREET ADDRESS	****165.00 ****165.00
		3.4 CITY-ST-ZIP	
		4.1 TITLE	
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	
		6.2 NAME	
		6.3 STREET ADDRESS	
		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Dulce Olmos Bozso*

CR2E034 (4/97)

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01/01/97

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Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Dear Sir/Ms.:

Per instructions from the Division of Corporations, I am attaching a check in the amount of \$165.00 for the Annual Report fee.

I also state that I have not received the first notice from the Division of Corporations.

Thank you for your courtesy in this matter.



President