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PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

PTD

99 APR 27 PM 3:48

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P97000032148**

1. Corporation Name
SCHMOOD MUSIC, INC.

Principal Place of Business	Mailing Address
404 WASHINGTON AVENUE SUITE 680 MIAMI BEACH FL 33139	404 WASHINGTON AVENUE SUITE 680 MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip / Country 24 / 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip / Country 29 / 30

3. Date Incorporated or Qualified
04/07/1997

4. FEI Number
65-0741594
[ ] Applied For [ ] 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. Has corporation ever filed Personal Property Tax? [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

HENRIQUES, SHONA
404 WASHINGTON AVENUE
SUITE 680
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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
Signature, typed or printed name of registered agent (Last, First, Middle) Date

12. OFFICERS AND DIRECTORS

TITLE	PTD	[ ] DELETE
NAME	WALKER, NADINE	
STREET ADDRESS	404 WASHINGTON AVENUE, SUITE 680	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	VD	[ ] DELETE
NAME	SMITH, ASTON	
STREET ADDRESS	404 WASHINGTON AVENUE, SUITE 680	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE	VD	[ ] DELETE
NAME	WALKER, NADINE	
STREET ADDRESS	404 WASHINGTON AVENUE, SUITE 680	
CITY-ST-ZIP	MIAMI BEACH FL 33139	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		[ ] Change [ ] Add
12 NAME		
13 STREET ADDRESS		
14 CITY-ST-ZIP		
21 TITLE		[ ] Change [ ] Add
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		[ ] Change [ ] Add
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		[ ] Change [ ] Add
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Add
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Add
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

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****150.00 ****150.00

CR2E034 (11/98)

14. 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 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, with all other like empowered.

SIGNATURE: Nadine Walker 4/29/99 305-531-7755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Telephone Number