


2007 FORTIFIED CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90143 050 ***150.00

DOCUMENT # V20961 1. Entity Name FLORRY'S MUSICAL ENTERPRISES, INC.					
Principal Place of Business 1822 SONRISA STREET WEST PALM BEACH, FL 33404 US			Mailing Address 1822 SONRISA STREET WEST PALM BEACH, FL 33404 US		
2. Principal Place of Business - No P.O. Box # 9632 SandPiper Ln		3. Mailing Address 9632 SandPiper Ln			
Suite, Apt. #, etc. West Palm B.		Suite, Apt. #, etc. West Palm B.			
City & State West Palm B.		City & State W.P.B.		4. FEI Number 65-0335908	
Zip 33411		Country W.P.B.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DUNCAN, VICTOR J. 1822 SONRISA STREET RIVIERA BEACH, FL 33404 9632 SandPiper Lane West Palm FL 33411				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent; and tele if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P DUNCAN, VICTOR J 1822 SONRISA STREET RIVIERA BEACH, FL 33404	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Duncan Victor 9632 SandPiper Lane W.P.B FL. 33411	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>Victor J. Duncan</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				3/21/07 <small>Date Daytime Phone #</small>	