2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # V24554

1. Entity Name

MUSICAL/ARTS CONSULTANTS OF HOLLYWOOD INC



FILED Apr 11, 2005 08:00 AM Secretary of State

Principal Place of Business

% MARK BLAIR RALSTON 326 SOUTH 14TH AVENUE HOLLYWOOD, FL 33020-5214 Mailing Address

% MARK BLAIR RALSTON 326 SOUTH 14TH AVENUE HOLLYWOOD, FL 33020-5214



DO NOT WRITE IN THIS SPACE

04012005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0401795 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RALSTON, MARK BLAIR 326 SOUTH 14TH AVENUE HOLLYWOOD, FL 33020-5214

DO NOT WRITE IN THIS SPACE

	. :				
	named entity submits this statement for the plons of registered agent.	urpose of changing its registered of	office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (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 Financ Trust Fund Contribution.				\$5.00 May Be Added to Fees	
TITLE NAME STREET ADDRESS	OFFICERS AND DIRECT D RALSTON, MARK BLAIR 326 SOUTH 14TH AVE	CTORS			
CITY-ST-ZIP	HOLLYWOOD, FL 33020	-31 <u>-31</u>			U00000298801
NAME STREET ADDRESS CITY-ST-ZIP					04/11/05-80084-003 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. Ange see		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		and the second			
TITLE					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

NAME STREET ADDRESS CITY-ST-ZIP

MAL BOWELL MORK BLAIR ROLSTON

48/05

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