2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 573820 1. Entity Name SAILS IN CONCERT, INC.

FILED Feb 17, 2004 08:00 AM Secretary of State

Principal Place of Business C/O THE PRENTICE-HALL CORPORATION SYSTEM 110 N. MAGNOLIA STREET TALLAHASSEE, FL 32301 US Mailing Address 1880 CENTURY PARK EAST SUITE 1600 LOS ANGELES, CA 90067		US						
		to see a se						
				02032004	No Chg-P	CR2E034 (10	V03)	
DO NOT WRITE IN THIS SPACE				4. FEI Numb	er		Applied For	
				95-324	5154	60.7	Not Applicable	
					5. Certificate of Status Desired \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent								
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301				DO NOT WRITE IN THIS SPACE				
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent atgnature required when reinstating) DATE								
	Signature, typed or printed trans or registeres egent and	upe il applicacie. (NOTE, registe	SEC AGE IL SIGNATURE I SC	in ec wich (en paging)		DATE		
FILE NOWIII FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 Trust Fund Contribution. Adde								
10.	OFFICERS AND DI	RECTORS				AND THE STREET, SALES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BUFFETT, JAMES W 1880 CENTURY PARK EAST, #16 LOS ANGELES, CA 90067	00			U00000 02/17/04	055399 -80037-010) 1 50.00	
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12. I hereby certify that the information supplied with this filling 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 cath; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR