SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** J69928 (6)PARTY DOWN AUTO SOUND, INC. Principal Place of Business Mailing Address 3030 NW 79TH ST 3030 NW 79TH ST. MIAMI FL 33147 MIAMI FL 33147 HS 3 Date Incorporated or Qualified 3a. Date of Last Report 04/29/1987 04/20/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2825903 21 26 Not Applicable Suite Apt #, etc Suite, Apt. # etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees  $Z_{\rm HD}$ Zin Country Country 8. This corporation has liability for intangible tax under s. 199.032 24 25 Yes No 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ELCHAMI, MARK 3030 NW 79 ST 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33147** 83 84 City 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. Thereby accept the appointment as registered agent. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE are dyperficings in a finite in ordering steed agreet and take it apply as te (NOTE: Respitational Agent signiture required when renaturings OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3.6)DELETE THLE 1.1 TITLE \_\_\_\_ Change \_\_\_\_ Addition ELCHAMI, MARK NAME 1.2 NAME CR2E034 3030 NW 79 ST STREET ADDRESS 1 3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 14 OTY ST-ZIP DELETE THILE 21 TITLE Change Addition ELCHAMI, NORMA LOREN NAME 2.2 NAME 3030 NW 79 ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DEFELE Change [ ] Addition LOSADA, GENOROSO 3.2 NAME 3030 NW 79 ST STREET ADDRESS 3.3 \$TREET ADDRESS MIAM! FL CITY-ST-7P 34 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS City St-Zip 44 CITY-ST ZIP DELETE TITLE Change Addition STRILE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHTY - ST - ZIP 54 CHTY-ST ZIP TITLE DELETE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CiTY - ST - ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that ied with this filing is voluntarity furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes | on this annual report or supplemental argual report is true and accurate and that my signature shall have the same legal effect as if the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes and all changed, or on an attaching them an address further certify that the made under oat that

or on an attachma

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(305) 836-9692

that my name a

SIGNATURE: