2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120412

Entity Name: DIRECTED ELECTRONICS, INC.

FILED Apr 01, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
ONE VIPER W VISTA, CA 920	'AY				•	
Current Mailing Address:				New Mailing Address:		
2665 S BAYSH MIAMI, FL 331		TE 800				
FEI Number: 33-0	1157199	FEI Number Applied For ()	FEI Num	nber Not Appli	cable () Cert	tificate of Status Desired()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
CALLEJAS, MARIA 2665 S BAYSHORE DR STE 800 MIAMI, FL 33133 US				GERSHMAN, DAVID 2665 S BAYSHORE DR STE 800 MIAMI, FL 33133 US		
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.						
SIGNATURE:	DAVID GE	RSHMAN				04/01/2005
	Electroni	c Signature of Registered Agent	t			Date
Election Campaig	gn Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D/P () Char MINARIK, JAMES E ONE VIPER WAY VISTA, CA 92083	nge (X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D () Char ISSA, DARRELL ONE VIPER WAY VISTA, CA 92083	nge (X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D/C () Char TEMPLETON, TROY 2665 SOUTH BAYSH MIAMI, FL 33133	_
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	CFO () Char HIRSHBERG, RICHA ONE VIPER WAY VISTA, CA 92083	nge (X) Addition RD
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	D/V () Char ELIAS, JON E 2665 SOUTH BAYSH MIAMI, FL 33133	nge (X) Addition ORE DR STE 800
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	S () Char KUFFNER, MARILYN 2665 SOUTH BAYSH MIAMI, FL 33133	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARILYN D KUFFNER S 04/01/2005