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PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000015764**

1. Corporation Name
SOUND VENTURE INC.

Principal Place of Business	Mailing Address
2023 WIND TRACE RD. S. NAVARRE FL 32566 US	PO BOX 5323 NAVAREE FL 32566 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 648 Powell Dr.	2a. Mailing Address 26 P.O. Box 1406
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Ft. Walton Bch. FL	City & State 28 Ft. Walton Bch FL
Zip 24 32547 Country 25 USA	Zip 29 32549 Country 30 USA

3. Date Incorporated or Qualifed: 02/19/1996

4. FEI Number: 59-3364775 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☑ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

STOCKER, KENNETH
2023 WIND TRACE RD S
NAVAREE FL 32566

10. Name and Address of New Registered Agent

81 Name: Kenneth Stocker
82 Street Address (P.O. Box Number is Not Acceptable): 648 Powell Dr.
83: P.O. Box 1406
84 City: Ft. Walton Bch. FL 85 Zip Code: 32549

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the ~~obligations of,~~ Section 607.0505, Florida Statutes.

SIGNATURE: Kenneth Stocker — 3-30-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STOCKER, KENNETH 2023 WIND TRACE RD. S. (PO BOX 5323 NAVAREE FL	☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	President - Director Kenneth Stocker 648 Powell Dr. (PO Box 1406) Ft. Walton Bch FL	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Secretary Kenneth Stocker 648 Powell Dr. (PO Box 1406) Ft. Walton Bch FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Treasurer Kenneth Stocker 648 Powell Dr. (P.O Box 1406) Ft Walton Bch FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED — 3-30-99 — 850-833-8960
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E031 (11/98)