FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000078185 (2)

1. Corporation Name
SONIC TECH DEPOT, INC.

Principal Place of Business
250 E. DR., STE. E
MELBOURNE FL 32904

Mailing Address
250 E. DR., STE. E
MELBOURNE FL 32904

3. Date Incorporated or Qualified: 10/09/1995
3a. Date of Last Report:

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

4. FEI Number: 59-3341985 ☐ Applied For ☐ Not Applicable

5. Certificate 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**

THALLER, WILLIAM A
7919 MAPLEWOOD DR., APT. 601
MELBOURNE FL 32904

10. **Name and Address of New Registered Agent**

81 Name: THALLER, WILLIAM A.
82 Street Address (P.O. Box Number is Not Acceptable): 2805 RHONDA COURT
83
84 City: MELBOURNE FL 85 Zip Code: 32935

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	~~DPS~~	☒ DELETE
NAME	~~CECIL, TAMMY M~~	
STREET ADDRESS	~~711 WINGFOOT LN.~~	
CITY-ST-ZIP	~~MELBOURNE FL 32940~~	
TITLE	DVT	☐ DELETE
NAME	THALLER, WILLIAM A	
STREET ADDRESS	7919 MAPLEWOOD DR., APT. 601	
CITY-ST-ZIP	MELBOURNE FL 32904	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	DPST	☒ Change ☐ Addition
2.2 NAME	WILLIAM A. THALLER	
2.3 STREET ADDRESS	2805 RHONDA CT	
2.4 CITY-ST-ZIP	MELBOURNE, FL 32935	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	500001879165	☐ Change ☐ Addition
5.2 NAME	-06/28/96--01040--008	
5.3 STREET ADDRESS	***200.00	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME	5-1-96	
6.3 STREET ADDRESS	JP	
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: William A. Thaller William A. Thaller 4/30/96 (407)984-3531
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)