# SIGNATURE: PETER W. RUIZ

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: Electronic Signature of Registered Agent

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.

#### Officer/Director Detail

Officer/Director Detail :			
Title	Р	Title	VP
Name	RUIZ, PETER W	Name	DECRANE, ROBERT J
Address	3730 HOLLOW WOOD DR	Address	17514 BRIGHT WHEAT DR
City-State-Zip:	VALRICO FL 33596	City-State-Zip:	LITHIA FL 33547

# 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000146743

Entity Name: SOUNDWAVES, INC.

### **Current Principal Place of Business:**

7002 E. ADAMO DRIVE UNIT A2 TAMPA, FL 33619

#### **Current Mailing Address:**

7002 E. ADAMO DRIVE UNIT A2 TAMPA, FL 33619 US

#### FEI Number: 59-3824896

# Name and Address of Current Registered Agent:

3730 HOLLOW WOOD DR VALRICO, FL 33596 US

RUIZ, PETER W

I hereby 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 all other like empowered.

PRESIDENT

04/02/2020

FILED Apr 02, 2020 Secretary of State 9337745838CC

Certificate of Status Desired: No

Date