

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 02, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # 433873

1. Entity Name  
TEKTONE SOUND AND SIGNAL MFG., INC.



Principal Place of Business  
277 INDUSTRIAL PARK ROAD  
FRANKLIN, NC 28734

Mailing Address  
277 INDUSTRIAL PK ROAD  
FRANKLIN, NC 28734 US



01172005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-1500771

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

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

SALEEBY-RANSIER, PA  
359 S COUNTY ROAD  
PALM BEACH, FL 33480

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME MIRA, MARIA LURDES  
STREET ADDRESS 296 CANTEBURY DRIVE E.  
CITY - ST - ZIP PALM BEACH GARDENS, FL

TITLE D  
NAME MIRA, MANUEL DE SOUSA  
STREET ADDRESS 296 CANTEBURY DRIVE EAST  
CITY - ST - ZIP PALM BEACH GARDENS, FL

TITLE P  
NAME MIRA, CARLOS ROBERT  
STREET ADDRESS 245 PATTON DOWNS RD  
CITY - ST - ZIP FRANKLIN, NC

TITLE ST  
NAME KNIPPEL, TERESA MIRA  
STREET ADDRESS 264 PATTON DOWNS RD  
CITY - ST - ZIP FRANKLIN, NC

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

000000210142  
02/02/05-80068-002 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Teresa Mira Knippel Teresa Mira Knippel 1/21/04 822 524 9967  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #