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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 515460 (4)

1. Corporation Name

SOUND DISTRIBUTORS, INC.

Principal Place of Business

251 ROYAL PALM WAY
MENDOZA, CALLAS & SCHILLING, PO BOX 2715
PALM BEACH FL 33480

Mailing Address

251 ROYAL PALM WAY
MENDOZA, CALLAS & SCHILLING, PO BOX 2715
PALM BEACH FL 33480

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

MENDOZA, CALLAS & SCHILLING
251 ROYAL PALM WAY, SIXTH FLOOR
PALM BEACH FL 33480-1310

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature typed or printed name of registered agent or director

NOTE: Registered Agents must be present when filing.

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
AS	WILKINSON, DEBRA	251 ROYAL PALM WAY	PALM BEACH, FL 00000	☐
S	DE MENDOZA, MARIO G, III	251 ROYAL PALM WAY	PALM BEACH, FL 00000	☐
VDT	CINICOLA, PETER	251 ROYAL PALM WAY	PALM BEACH, FL 00000	☐
PD	CINICOLA, JOHN	251 ROYAL PALM WAY	PALM BEACH, FL 00000	☐
				☐
				☐

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. CHANGE	6. ADDITION
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John Cinicola, President

4/28/96

(407) 689-5255

CR2E034 (12/95)