SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

SIGNATURE:

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEFARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # 656817 (4)FT. MYERS AUTO SOUND, INC. Principal Place of Business Mailing Address 4145 FOWLER ST 4145 FOWLER ST FT. MYERS FL 33901 FT. MYERS FL 33901 3. Date Incorporated or Qualified 3a. Date of Last Report 02/22/1980 03/21/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-1981588 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Country 8. This corporation has liability for intangible tax under s. 199 032 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZAGER. DAVID R. 9301 HEATHER LANE 82 Street Address (P.O. Box Number is Not Acceptable) NORTH FORT MYERS FL 33917 63 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. Signature, typed or peoled name of registered agent and title if applicable (NOTE: Fle ji: tered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)TITLE DELETE 1.1 TITLE Change Addition NAME ZAGER, DAVID R 1.2 NAME CR2E034 STREET ADDRESS 9301 HEATHER LANE 1.3 STREET ADDRESS CITY - ST - ZIP NORTH FORT MYERS FL 1.4 CITY - ST - 7/P Change X Addition TITLE DELETE 2.1 TITLE Vice-President NAME 2.2 NAME Richard R. Zager STREET ADDRESS 2.3 STREET ADDRESS 6969 Highland Park Circle CITY-ST-ZIP 2 4 CITY - ST - ZiP Fort Myers, FL 33912 TITLE DELETE Change X Addition 3 1 TITLE Vice-President 3.2 NAME Clayton W. Ernst STREET ADDRESS 3.3 STREET ADORESS 2150 West First Street, Suite 4B CITY-ST-ZIP 3.4 CITY - ST - ZIP Fort Myers, FL 33901 DELETE Change Addition TITLE 4111111 NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - \$T - 7IF DELETE Change Addition TITLE 5.1 THE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - \$1 - ZIP DELETE Change Add-tion TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64CHY-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 eath, that I am an off-cer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNING OFFICER OR DIRECTOR