

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 656817

FILED
Jul 13, 2007
Secretary of State**Entity Name:** FT. MYERS AUTO SOUND, INC.**Current Principal Place of Business:**4145 FOWLER ST
FT. MYERS, FL 33901**New Principal Place of Business:****Current Mailing Address:**4145 FOWLER ST
FT. MYERS, FL 33901**New Mailing Address:****FEI Number:** 59-1981588**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ZAGER, DAVID R.
9301 HEATHER LANE
NORTH FORT MYERS, FL 33917 US**Name and Address of New Registered Agent:**PALMER, GABREAL K P
4145 FOWLER ST
FT.MYERS, FL 33901 US

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.

SIGNATURE: GABREAL K PALMER

07/13/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: ZAGER, DAVID R
Address: 9301 HEATHER LANE
City-St-Zip: NORTH FORT MYERS, FL**Title:** VP (X) Delete
Name: ZAGER, RICHARD R
Address: 17120 TERRAVERDE CIRCLE #5
City-St-Zip: FT MYERS, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: PALMER, GABREAL K
Address: 4145 FOWLER ST
City-St-Zip: FT MYERS, FL 33901**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GABREAL K PALMER

PD

07/13/2007

Electronic Signature of Signing Officer or Director

Date