

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90081 036 ***150.00

DOCUMENT # F00000004199

1. Entity Name
SOUND COMMUNICATIONS CORPORATION

Principal Place of Business

10218 NW 44 TERRACE
MIAMI FL 33178

Mailing Address

10218 NW 44 TERRACE
MIAMI FL 33178

2. Principal Place of Business

20379 W. Country Club Dr

Suite, Apt. #, etc.

2132

City & State

Aventura, FL

Zip

33180

Country

3. Mailing Address

20379 W. Country Club Dr

Suite, Apt. #, etc.

2132

City & State

Aventura, FL

Zip

33180

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0959099

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FARIAS, NOLBERTO R

3737 N. COUNTRY CLUB DR

SUITE #1924

MIAMI FL 33180

7. Name and Address of New Registered Agent

Name

FARIAS, NOLBERTO

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

20379 W. Country Club Dr # 2132

City

Aventura

FL

Zip Code

33180

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.

SIGNATURE

Signature of officer or director of registered agent and title if applicable.

(NOTE: Registered agent signatures required when reinstating)

4/25/02

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PCDS ☐ Delete
NAME FARIAS, CRISTHIAN
STREET ADDRESS 10218 NW. 44 TERRACE
CITY-ST-ZIP MIAMI FL 33178

TITLE TDVC ☐ Delete
NAME TUPPER, MICHAEL
STREET ADDRESS 5700 COLLINS AVENUE #10C
CITY-ST-ZIP MIAMI BEACH FL 33140

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCDS ☒ Change ☐ Addition
NAME FARIAS, CRISTHIAN
STREET ADDRESS 20379 W. Country Club Dr # 2132
CITY-ST-ZIP Aventura, FL 33180

TITLE TDVC ☒ Change ☐ Addition
NAME TUPPER, MICHAEL
STREET ADDRESS 5223 NW 94 Doral PL.
CITY-ST-ZIP MIAMI, FL 33178

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02

Date

(305) 932-5966

Daytime Phone #

CR2E034 (9/01)