2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005932

Entity Name: SOUND TECHNOLOGIES IMAGING, INC.

FILED Mar 18, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
5817 DRYE SUITE 101	DEN PLACE						
	D, CA 92008						
Current Mailing Address:			New Mai	New Mailing Address:			
	ST OLYMPIC E ELES, CA 9006						
FEI Number:	33-0900627	FEI Number Applied For ()	FEI Number Not Ap	plicable()	Certificate of Status I	Desired ()	
Name and	Address of C	urrent Registered Agent:	Name an	d Address of N	lew Registered Ago	ent:	
1200 SOUT PLANTATION The above		ND RD.	urpose of changing	its registered o	ffice or registered aಛ	gent, or both,	
in the State	of Florida.						
SIGNATURE:							
	Electron	ic Signature of Registered Age	nt		Date		
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	ANTIN, ROBER	LYMPIC BOULEVARD	Title: Name: Address: City-St-Zip:		Change () Addition		
Title: Name: Address: City-St-Zip:	TAUBER, NEIL 12401 WEST O LOS ANGELES,		Title: Name: Address: City-St-Zip:	TAUBER, NEIL 12401 WEST O LOS ANGELES			
Title: Name: Address: City-St-Zip:	FULLER, TOMÁ	LYMPIC BOULEVARD	Title: Name: Address: City-St-Zip:		Change () Addition		
Title: Name: Address: City-St-Zip:	ANTIN, ARTHUR	LYMPIC BOULEVARD	Title: Name: Address: City-St-Zip:	()	Change () Addition		
Title: Name: Address: City-St-Zip:	EYL, STEVE	Delete PLACE, SUITE 101 . 92008	Title: Name: Address: City-St-Zip:	, ,	Change () Addition		

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: TOMAS W. FULLER VP 03/18/2009