2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE AND TYPED OR PRINTED NAME O

May 11, 2007 8:00 am Secretary of State DOCUMENT # F05000004077 05-11-2007 90037 002 ***150.00 **NILES AUDIO CORPORATION** Principal Place of Business Mailing Address 40111929 C/O NORTEK, INC. C/O NORTEK, INC. **50 KENNEDY PLAZA 50 KENNEDY PLAZA** PROVIDENCE, RI 02903 PROVIDENCE, RI 02903 2. Principal Place of Business - No P.O. Box # 12331 SW 130 Street 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04182007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For Miami, 35-133 20-2742001 FLNot Applicable Country Country Zip 33186 Zip \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zin Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 Trust Fund Contribution After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Defete . X Change ☐ Addition TITLE BREADY, RICHARD L NAME Sterns, Frank K. STREET ADDRESS 50 KENNEDY PLAZA STREET ADDRESS 12331 SWL130 Street CITY-ST-ZIP PROVIDENCE, RI 02903 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition DONNELLY, KEVIN W NAME NAME STREET ADDRESS 50 KENNEDY PLAZA STREET ADDRESS CITY-ST-ZIP PROVIDENCE, RI 02903 CITY-ST-ZIP ☐ Change TIN F □ Defete TITLE ☐ Addition COONEY, EDWARD J NAME NAME STREET ADDRESS **50 KENNEDY PLAZA** STREET ADDRESS CiTY-ST-ZIP PROVIDENCE, RI 02903 CITY-ST-ZIP **VCD** IIILE ☐ Delete TITLE ☐ Change Addition Bready, Richard L. 50 Kennedy Plaza NAME NAME STREET ADDRESS STREET ADDRESS Providence, RI 02903 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITL F Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS COTY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: _

CER OR DIRECTOR

FILED