FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G98321

(4)

STEREO BY DESIGN, INC.

Principal Place of Business

Mailing Address

14227 SOUTH DIXIE HIGHWAY MIAMI FL 33176

14227 SOUTH DIXIE HIGHWAY MIAMI FL 33176-7224

FILED May 07 1997 8:00am Secretary of State



MIAMI FL 3317	6	MIAMI FL 33176-7224			
				Date Incorporated or Qualified 04/19/1984	3a. Date of Last Report 05/01/1996
	ace of Business 27 TH ST.	2a, Majling Address 26 8280 NU	1.27世ST	4, FEI Number 59-2399526	Applied For Not Applicable
21 848 C Suite, Apt.		Suite Ant # etc			\$8.75 Additional
22 Mº		27 Hº 50	5	5. Certificate of Status Desired	Fee Required
City & State	MI FL.	City & State	FL.	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 M/A	Country	28 MIANI	Country	Trust Fund Contribution 8. This corporation has liability for in	
24 731	26. 25 U.S.A.	29 33(22 3	0.024	Florida Statutes	yes □ No
	g, Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	ilstered Agent
	Denas, Rigoberto 18 SW 45 Lan e - 82 <i>På</i> n.	W. 277457			
	VII JC1 _0043E_==		82 Street Addr	ress (P.O. Box Number is Not Acceptable	e)
Will W	SUITE	· , 505	83		
	N MILTO	J FLA. 33/2	Z. 84 City		85 Zip Code
	MI V				FL ` `
11. Pursuant 1 office or re	a diatozad oblama ar ballu in tha SIMa W	l Etarida. Such channa was aut	borized by the corporat	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered
agent. I a	m familiar (Wit, and salidar) the tobligal	ons of, Section 607.0505, Florid	da Statutes.	MX	pallola7
SIGNATURE	Signature, i) and of Aries Aries of Trues	and title if applicable (NOTE - F	registered Agent signature requir	red when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DVT EDOMON/TZ ALANI	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FROMOWITZ, ALAN 1542 NW 182 WAY		1.2 NAME 1.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	PEMBROKE PINES FL		1.4 CITY-ST-ZIP		
TITLE	DPS	DELETE	2.1 TITLE		Change Addition
NAME	CARDENAS, RIGOBERTO		2.2 NAME		
STREET ADDRESS	13216 SW 45TH LANE		2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	DELETE	2. 4 CITY- ST-ZIP 3.1 TITLE		Change Addition
TITLE NAME	HOLLINGSWORTH, CONCEPCIO	•	3.2 NAME		Ci Angula Ci Angulan
STREET ADDRESS	14227 S. DIXIE HWY		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4 4 CITY-S1-ZIP 5 1 TITLE		Change Addition
NAME		•	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP			5.4 CITY-S1-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME		^	6.2 NAME		
STREET ADDRESS		(A)	6.3 STREET ADDRESS		
CITY-ST-ZIP 14. I do herel	by certify that the information supplied	un this filing does not qualify	for the exemption state	o in Section 119.07(3)(i), Florida Statutes	s. I further certify that the
informatio	in indicated on this annual report or su flicer or director of the corporation or t	plegiental annual report is true e niceiver or tilustee empower	gland accurate and tha d to execute this repo	t my signature shall have the same lega rt as required by Chapter 607, Florida S	I effect as if made under eath; tha tatutes; and that my name
appears i	n Block 12 or Block 13 if changed, or i	in wattachment with air a ldre	ss.		