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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J25027

(0)

JOHN'S AUTO SOUND, INC.

Principal Place of Business Mailing Address 5765 FUNSTON ST 5765 FUNSTON ST HOLLYWOOD FL 33023 HOLLYWOOD FL 33023-1929 3. Date Incorporated or Qualified 3a. Date of Last Report 07/22/1986 05/09/1996 2. Principal Place of Business 2a. Maling Address 4. FEI Number Applied For 59-2697062 26 Not Applicable Suite: Act #. ct-Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country **8.** This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\bigcap \text{No}\) No 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BROOKS, MICHAEL J. 626 NE 124 ST 82 Street Address (P.O. Box Number is Not Acceptable) N MIAMI FL 33161 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registined agent, or both in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, han furnished with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) in improve or one of the control of the graderical agent amount of it applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) DELETE 10.6 1.1 TIBLE Change Addition FALZARANO, JOHN NAME 1.2 NAME **5765 FUNSTON ST** 1.3 STREET ADDRESS HOLLYWOOD FL 1.4 CITY-ST-ZIP CHY - 5.1 - 76 DELETE Change Addition 101.1 2.1 TITLE NAME 2.2 NAME SHIFEL ADDIES! 2.3 STREET ADDRESS 000 - \$1 - 76 2. 4 CITY- ST- ZIP DELETE Change Addition hi. E 3.1 TITLE NAME 3.2 NAME STREET AUDINESS 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP CITY - St. 7e DEL ETE 4.1 TITLE Addition Itich NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS Clay St. 7et 4.4 CITY-ST-ZIP DELETE Addition 10.1 5 1 TITLE NAME 5.2 NAME STREET A ROTHER **5.3 STREET ADORESS** 1015 ST 76 5.4 CITY: ST-ZIP DELETE Addition BH 6.1 TITLE NAME 6.2 NAME

14. I do hereby cord by that the information supposed with this fining does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that take an office or director of the corporation or the receiver or trostee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brook 12 or Block

6.4 CHY-ST-2IP

6.3 STREET ADDRESS

STREET ZODIA SI

miv St. Ac

FILED

Mar 19 1997 8:00am

Secretary of State