Feb 20, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # J25308

CITY-ST-ZIP

SOUND A	NCHORS, INC.													
Principal Place	of Business		Mailing Address			<u> </u>		1 (64(1) 6)14 11		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,, ,,,,,			
Principal Place of Business 2835 KIRBY AVE UNIT 110 PALM BAY FL 32905 US			872 VANCE CIR NE PALM BAY FL 32905-5498 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified						
								07/17/1986						. 4 5
2. Principal Pla	ace of Business	2:	a. Mailing Address					4. FEI Number				\vdash	<u>:</u> -	ed For
21		26						59-2657501				\$8.7	_	Applicable ditional
Suite, Apt. #	ŧ, etc.	27	Suite, Apt. #, etc.					5. Certifcate of Stat	us Desired			Fee	Requ	ired
City & State			City & State					6. Election Campaig	gn Financing			T	00 м	,
23		28	·					Trust Fund Cont					ed to	rees
Zip	Country		Zip		Country	,		8. This corporation		rent yea	r Intan ז	ngible ∐Yes	fs	No
24	25	29		30				Personal Proper 10. Name and Addi		Pagieta				
	9. Name and Address	of Current Reg	istered Agent		81	Name		10. Name and Addi	GSS OF NEW	· redisin	. ou A	Be. 11		 -
WOR	TALLA DETER I				01									
	ZALLA, PETER J.				82	Street	Addres	ss (P.O. Box Number	is Not Accept	able)				
	ANCE CIRCLE NE				83	ļ								
PALIV	1 BAY FL 32905				03									
					84	City				-	FL	85	Zip Co	de
11. Pursuant t	o the provisions of Section	s 607.0502 and	1 607.1508, Florida S	Statutes, th	he abov	e-named the corp	corpor	oration submits this stands board of directors.	tement for the I hereby acce	purpose pt the a	e of cl ppoint	ment a	g its re is regis	egistered stered
office or re agent. I ar	egistered agent, or both, in n familiar with, and accept	the obligations	of, Section 607.050	5, Florida	Statutes	3.		when reinstating)		DAT	E			
office or re agent. I ar SIGNATURE	agistered agent, or both, in n familiar with, and accept Signature, typed or printed name of re	the obligations	of, Section 607.050	5, Florida	Statutes	3.				DAT	E	D DIRE	CTOR	S IN 12
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14. 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 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 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.