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PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # J74231



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90098 007 ***150.00

AUDIO OUTLET, INC. Principal Place of Business Mailing Address 125-F NE 23RD AVE 125-F NE 23RD AVE GAINESVILLE FL 32609 GAINESVILLE FL 32609 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/21/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0002587 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible □No Personal Property Tax. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GILBERT, JONATHAN N. 82 Street Address (P.O. Box Number is Not Acceptable) 3841 N.W. 11ST PL. GAINESVILLE FL 32605 83 Zin Code 84 City 85 FI 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 registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Addition ☐ Change □ DELETE 1.1 TITLE TITLE NAME GILBERT, JONATHAN N. 1.2 NAME STREET ADDRESS 3841 N.W. 11TH PL. 1.3 STREET ADDRESS **GAINESVILLE FL** 1.4 CITY-ST-ZIP CITY-ST-ZIF Addition Change TITLE □ D€LETE 2.1 TITLE GILBERT, LESA R. 2.2 NAME NAME STREET ADDRESS 3841 N.W. 11TH PL. 2.3 STREET ADDRESS CITY-ST-ZIP GAINESVILLE FL 2.4 CiTY-ST-ZIP ☐ Addition ☐ Change □ DELETE 3.1 TITLE TITLE NAME CARLISLE, EDWARD 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS RT 2 BOX 116 TRENTON FL 32693 34 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

CR2E034 (11/98)