2007 FOR PROFIT CORPORATION ANNUAL REPORT **FILED** Feb 05, 2007 08:00 AM DOCUMENT # J84084 **Secretary of State** 1. Entity Name CLEAN SOUNDS INC. Principal Place of Business Mailing Address 11750 KIMMIE DRIVE 11750 KIMMIE DRIVE COOPER CITY, FL 33026 COOPER CITY, FL 33026 US 01242007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2832544 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FLAYMAN, ERIC DO NOT WRITE 10974 NEPTUNE DRIVE COOPER CITY, FL 33026 IN THIS SPACE 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 regulred when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS TITLE PΠ FLAYMAN, ERIC NAME 11750 KIMMIE DRIVE STREET ADDRESS CITY-ST-ZIP COOPER CITY, FL 33026 VP TITLE NAME FLAYMAN, DAVID STREET ADDRESS 8080 NW 15TH MANOR CITY-ST-ZIP PLANTATION, FL STD TITLE NAME FLAYMAN, SONDRA STREET ADDRESS 8080 NW 15TH MANOR CITY-ST-ZIP PLANTATION, FL TITLE AT FLAYMAN, LYSSA NAME STREET ADDRESS 11750 KIMMIE DRIVE CITY-ST-ZIP COOPER CITY, FL 33026 NAME STREET ADDRESS CITY-ST-ZIP

U00000619927 02/09/07-80016-016 150.00

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

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 trop 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 true ee 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. FRIC FLAYIMA

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ITED NAME OF SIGNING OFFICER OR DIRECTOR

PREDIDON-