

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K01481** (6)

1. Corporation Name

PALM BEACH SOUND & SYNTHESIS, INC.



Principal Place of Business

Mailing Address

C/O DEBORAH S. MORSE
4653 SPRUCE LANE
PALM BEACH GARDENS FL 33418

C/O DEBORAH S. MORSE
4653 SPRUCE LANE
PALM BEACH GARDENS FL 33418

3. Date Incorporated or Qualified
11/06/1987

3a. Date of Last Report
04/21/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
6116 WILDCAT RUN

26 Suite, Apt. #, etc.
6116 WILDCAT RUN

22 City & State
WEST PALM BEACH, FL

27 City & State
WEST PALM BEACH FL

23 Zip
33412

28 Zip
33412

24 Country
USA

29 Country
USA

4. FEI Number
65-0024693

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SIMSI, DEBORAH M.
4653 SPRUCE LANE
PALM BEACH GARDENS FL 33418

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
6116 WILDCAT RUN

83

84 City **WEST PALM BEACH** FL 85 Zip Code **33412**

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 their address

(If Other Registered Agent Submit on Separate Sheet, Also Certifying)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DVS** ☐ DELETE
NAME **SIMSI, JOHN E.**
STREET ADDRESS **4653 SPRUCE LANE**
CITY-ST-ZIP **PLM. BCH. GARDENS FL**

TITLE **PD** ☐ DELETE
NAME **SIMSI, DEBORAH**
STREET ADDRESS **4653 SPRUCE LANE**
CITY-ST-ZIP **PALM BEACH GARDENS FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP **6116 WILDCAT RUN
WEST PALM BEACH, FL 33412**

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP **6116 WILDCAT RUN
WEST PALM BEACH, FL 33412**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John E. Simsi
JOHN E. SIMSI

4/17/96

040 741

Date

Daytime Phone #

CR2E034 (12/95)