

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K12233

FILED
Mar 03, 2004
Secretary of State

Entity Name: STEREO GARAGE, INC.

Current Principal Place of Business:

CHRIS CONA
1695 COMMERCIAL DR
NAPLES, FL 34112 US

New Principal Place of Business:

Current Mailing Address:

CHRIS CONA
1695 COMMERCIAL DR
NAPLES, FL 34112 US

New Mailing Address:

FEI Number: 65-0022323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONA, CHRIS J
1695 COMMERCIAL DR
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCP () Delete
Name: CONA, CHRIS J
Address: 1931 E. CROWN POINT BLVD.
City-St-Zip: NAPLES, FL 34112

Title: DS () Delete
Name: CONA, MADI
Address: 1931 E. CROWN POINT BLVD.
City-St-Zip: NAPLES, FL 34112

Title: DV () Delete
Name: CONA, JOHN
Address: 2342 QUEENS WAY
City-St-Zip: NAPLES, FL 34112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DV (X) Change () Addition
Name: CONA, JEANNE
Address: 2342 QUEENS WAY
City-St-Zip: NAPLES, FL 34112

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRIS CONA

DCP

03/03/2004

Electronic Signature of Signing Officer or Director

Date