

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90049 029 ***150.00

DOCUMENT # K60867

1. Entity Name
SUNBEAM CAR CARE, INC.



Principal Place of Business
**10018 SPANISH ISLES BLVD.
WEST PALM BEACH, FL 33415**
Boca Raton, FL 33498

Mailing Address
**10018 SPANISH ISLES BLVD.
WEST PALM BEACH, FL 33415**

2. Principal Place of Business

10018 Spanish Isles Blvd

3. Mailing Address

10018 Spanish Isles Blvd

Suite, Apt. #, etc.

Bay A-3

Suite, Apt. #, etc.

Bay A-3

City & State

Boca Raton FL

City & State

Boca Raton FL

Zip

33498

Country

Palm Beach

Zip

33498

Country

Palm Beach

02212006

Chg-P

CR2E034 (11/05)

4. FEI Number

65-0170785

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HAYAT, AVRAHAM
1042 SO. MILITARY TRAIL
WEST PALM BEACH, FL 33415**

7. Name and Address of New Registered Agent

Name *Sunbeam Car Care DBA Audio Limits*
Street Address (P.O. Box Number is Not Acceptable)
10018 Spanish Isles Blvd
City & State *Boca Raton FL* Zip Code *33498*

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: *Avraham Hayat*

(NOTE: Registered Agent signature required when resigning)

2-21-06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	AVRAHAM, HAYAT	
STREET ADDRESS	18839 CASPIAN CIRCLE	
CITY-ST-ZIP	BOCA RATON, FL 33498	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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TITLE		<input type="checkbox"/> Delete
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Avraham Hayat*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-21-06

DATE

561-488-5557

Daytime Phone #