2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000088010

1. Entity Name
B SYSTEMS AUDIO, LLC

Principal Place of Business	Mailing Address
1711 LAKESIDE AVENUE STE 6 ST. AUGUSTINE, FL 32084 US	1711 LAKESIDE AVENUE STE. 6 ST. AUGUSTINE, FL 32084 US

DO NOT WRITE IN THIS SPACE

06252008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
20-3423980	Not Applicable

5. Certificate of Status Desired ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

PARKER, WILLIAM L
1711 LAKESIDE AVENUE
STE. 6
ST. AUGUSTINE, FL 32084

DO NOT WRITE 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 required when reinstating)   DATE

FILE NOW!!! FEE IS $138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PARKER, WILLIAM
STREET ADDRESS	307 C STREET
CITY-ST-ZIP	ST. AUGUSTINE, FL 32080
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000954324
07/11/08--80008-022 138.75

DO NOT WRITE IN THIS SPACE

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: X _____   7-7-08   9043477665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #