

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Aug 02 1996 8:00 am
Secretary of State

DOCUMENT # L39099

(1)

1. Corporation Name

SOUND PROTECTION, INC.

Principal Place of Business

Mailing Address

9000 SW 40TH STREET
MIAMI FL 33165
US

9000 SW 40TH ST
MIAMI FL 33165



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/29/1989

3a. Date of Last Report

08/11/1995

4. FEI Number

65-0169256

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

10. Name and Address of New Registered Agent

BISCHOFF, ANTONIO
13440 SW 22ND ST
MIAMI FL 33175

81 Name

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

83

84 City

FL

85 Zip Code

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 in block, and signed in ink by the registered agent.

(NOTE: Registered Agent Signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME PRET
STREET ADDRESS BISCHOFF, MARIA
CITY- ST- ZIP 595 NW 127TH AVE.
MIAMI FL

TITLE ☒ DELETE
NAME S
STREET ADDRESS BISCHOFF, HILDA
CITY- ST- ZIP 9000 SW 40 ST
MIAMI FL

TITLE ☒ DELETE
NAME VPRS
STREET ADDRESS BISCHOFF, ANTONIO
CITY- ST- ZIP 595 NW 127TH AVE.
MIAMI FL

TITLE ☐ DELETE
NAME T
STREET ADDRESS FERNANDEZ, AN MILENA
CITY- ST- ZIP 6820 SW 45TH LANE, #5
MIAMI FL

TITLE ☐ DELETE
NAME VPRS.
STREET ADDRESS RAFAEL SANCHEZ.
CITY- ST- ZIP 296 RACKET CLUB ROOE #106
Ft. Lauderdale 33326

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY- ST- ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

41 TITLE ☐ Change ☒ Addition

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 or changed, or on an attachment with an address.

SIGNATURE:

Yvona Bischoff president.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

FILE # - PAGE #

CR2E034 (12/95)