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Max Darucaud

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FILED
Aug 15, 2003 8:00 am
Secretary of State

6/13/200

06-13-2003 90059 004 ***150.00

2003 FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000011128

1. Entity Name
BEST AUDIO, INC.

Principal Place of Business: 13716 NW 11TH AVENUE, NORTH MIAMI, FL 33161
Mailing Address: 674 NW 158TH LANE, PEMBROKE PINES, FL 33028

2. Principal Place of Business: [Redacted]
3. Mailing Address: [Redacted]

4. FFI Number: 05-0982478
Applied For: [] Not Applicable

5. Certificate of Status Desired: [] \$8.75 Additional Fee Req. 2003

6. Name and Address of Current Registered Agent: NOEL JOSEPH R P.A., 3204 NORTH STATE ROAD 7, LAUDERDALE LAKES, FL 33019
7. Name and Address of New Registered Agent: [Redacted]

8. The above filer(s) hereby certifies the statements for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am filer or wife, and accept the consequences of its statement.

SIGNATURE: [Redacted] DATE: [Redacted]

9. Fraction Change on Filing: [] \$5.00 Fee Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: PRES NAME: DARUCAUD, MAX STREET ADDRESS: 674 NW 158TH LANE CITY-ST-ZIP: PEMBROKE PINES, FL 33028	<input type="checkbox"/> Delete	TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Change <input type="checkbox"/> Add New
TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Delete	TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Change <input type="checkbox"/> Add New
TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Delete	TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Change <input type="checkbox"/> Add New
TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Delete	TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Change <input type="checkbox"/> Add New
TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Delete	TITLE: [Redacted] NAME: [Redacted] STREET ADDRESS: [Redacted] CITY-ST-ZIP: [Redacted]	<input type="checkbox"/> Change <input type="checkbox"/> Add New

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 190.07(2)(g), Florida Statutes. I further certify that the information appears on the report or supplemental report is true and accurate as of the date my signature shall have the same legal effect as if it is true 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, will of over the employees.

SIGNATURE: [Signature] DATE: 5-23-03

55054259



CHECK HERE IF MAKING CHANGES

CORPORATION (12/03)

Attachment

55054259

#P0000001126

Best Audio, Inc.
574 NW 158th Lane
Pembroke Pines, FL 33028

June 23, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir or Madam:

Our 2003 Uniform Business Report was returned with a request for an additional \$400. Please be advised that we never received the original form from the state and we were advised by your department that we could send in this form which we printed from the internet without paying the penalty.

We respectfully request that the Department of State waive this penalty, thank you!

Sincerely,

Max Darucaud

Max Darucaud, President