

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 06, 2005 8:00 am**  
**Secretary of State**

04-06-2005 90121 030 \*\*\*158.75

**DOCUMENT # P00000075851**



1. Entity Name

SOUNDLINK INC.

Principal Place of Business

3610 OCEAN BEACH BLVD.  
203A  
COCOA BEACH FL 32931

Mailing Address

3610 OCEAN BEACH BLVD.  
203A  
COCOA BEACH FL 32931

2. Principal Place of Business

326 S. Second St.

Suite, Apt. #, etc.

3. Mailing Address

326 S. Second St.

Suite, Apt. #, etc.

City & State

Cocoa Beach FL

Zip

32931

Country

USA

City & State

Cocoa Beach FL

Zip

32931

Country

USA

4. FEI Number

65-1083611

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HALEN, SUSAN A  
3610 OCEAN BEACH BLVD.  
#203A  
COCOA BEACH FL 32931

7. Name and Address of New Registered Agent

Name

Susan A. Halen

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

326 S. Second St.

City

Cocoa Beach

FL

Zip Code

32931

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

*Susan A. Halen*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

3/30/05

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2005 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME HALEN, SUSAN A  
STREET ADDRESS 3610 COEAN BEACH BLVD., #203A  
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P ☒ Change ☐ Addition  
NAME Susan A. Halen  
STREET ADDRESS 326 S. Second St.  
CITY-ST-ZIP Cocoa Beach FL 32931

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Susan A. Halen*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/05 (321)784-4540

Date

Daytime Phone #