

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000092787

Entity Name: SUGAR SOUNDS, INC.

FILED  
Apr 16, 2007  
Secretary of State

## Current Principal Place of Business:

6900 BAY DR., #PH-B  
MIAMI BEACH, FL 33141

## New Principal Place of Business:

7430 BEACH VIEW DR  
NORTH BAY VILLAGE, FL 33141

## Current Mailing Address:

6900 BAY DR., #PH-B  
MIAMI BEACH, FL 33141

## New Mailing Address:

PO BOX 415098  
MIAMI BEACH, FL 33141

FEI Number: 65-1045914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEOLI, NICHOLAS L  
6900 BAY DR., #PH-B  
MIAMI BEACH, FL 33141 US

## Name and Address of New Registered Agent:

MEOLI, GENNARO P  
7430 BEACH VIEW DR  
NORTH BAY VILLAGE, FL 33141 US

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.

SIGNATURE: GENNARO MEOLI

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MEOLI, GENNARO P  
Address: 6900 BAY DR., #PH-B  
City-St-Zip: MIAMI BEACH, FL 33141

Title: PD (X) Delete  
Name: MEOLI, GENNARO P  
Address: 6900 BAY DRIVE #PH-B  
City-St-Zip: MIAMI BEACH, FL 33141

Title: PD (X) Delete  
Name: MEOLI, GENNARO P  
Address: 6900 BAY DRIVE #PH-B  
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Address: 6900 BAY DRIVE #PH-B  
City-St-Zip: MIAMI BEACH, FL 33141

Title: PD (X) Delete  
Name: MEOLI, GENNARO P  
Address: 6900 BAY DRIVE #PH-B  
City-St-Zip: MIAMI BEACH, FL 33141

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: MEOLI, GENNARO P  
Address: 7430 BEACH VIEW DR  
City-St-Zip: NORTH BAY VILLAGE, FL 33141

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENNARO MEOLI

P

04/16/2007

Electronic Signature of Signing Officer or Director

Date