2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2004 08:00 AM DOCUMENT # P01000041316 **Secretary of State** 1. Entity Name AUDIOPARTS, INC. Principal Place of Business Mailing Address 7426 GREENVILLE CIRCLE 7426 GREENVILLE CIRCLE LAKE WORTH, FL 33467 LAKE WORTH, FL 33467 No Chg-P 01232004 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1107863 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WEIN, STUART DO NOT WRITE 7426 GREENVILLE CIRCLE LAKE WORTH, FL 33467 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 algoriture required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fee: OFFICERS AND DIRECTORS 10. TITLE WEIN, STUART MAME 7426 GREENVILLE CIRCLE STREET ADDRESS U00000109615 04/12/04-80050-014 150.00 CITY-ST-ZIP LAKE WORTH, FL 33467 TIBLE NAME STREET ADDRESS SITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP शहर IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TIBLE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS CITY-ST-73P

12. I hereby certify that the information supplied with this filling 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attagingent with an address, with all other like empowered.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

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