

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000112783

FILED  
Mar 04, 2003  
Secretary of State

Entity Name: DIRECTED AUDIO, INC.

## Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE  
SUITE 800  
MIAMI, FL 33133

## New Principal Place of Business:

## Current Mailing Address:

2665 SOUTH BAYSHORE DRIVE  
SUITE 800  
MIAMI, FL 33133

## New Mailing Address:

FEI Number: 52-2358752      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARIA C. CALLEJAS  
2665 SOUTH BAYSHORE DRIVES  
SUITE 800  
MIAMI, FL 33133 US

## Name and Address of New Registered Agent:

GERSHMAN, DAVID  
2665 SOUTH BAYSHORE DRIVES  
SUITE 800  
MIAMI, FL 33133 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: DAVID GERSHMAN

03/04/2003

Electronic Signature of Registered Agent

Date

## Election Campaign Financing Trust Fund Contribution ( )

### OFFICERS AND DIRECTORS:

Title: S ( ) Delete  
Name: KUFFNER, MARILYN D  
Address: 2665 SOUTH BAYSHORE DRIVE STE 800  
City-St-Zip: MIAMI, FL 33133 US

Title: T ( ) Delete  
Name: HIRSCHBERG, RICHARD  
Address: ONE VIPER WAY  
City-St-Zip: VISTA, CA 92083 US

Title: DP ( ) Delete  
Name: MINARIK, JAMES E  
Address: ONE VIPER WAY  
City-St-Zip: VISTA, CA 92083 US

Title: DCOB ( ) Delete  
Name: TEMPLETON, TROY D  
Address: 2665 SOUTH BAYSHORE DRIVE SUITE 800  
City-St-Zip: MIAMI, FL 33133 US

Title: DV ( ) Delete  
Name: ELIAS, JON E  
Address: 2665 SOUTH BAYSHORE DRIVE SUITE 800  
City-St-Zip: MIAMI, FL 33133 US

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: MARILYN D. KUFFNER

S

03/04/2003

Electronic Signature of Signing Officer or Director

Date