

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000026687

**FILED**  
**Feb 01, 2011**  
**Secretary of State**

**Entity Name:** COMPLETE AUDIO & ELECTRONICS, INC.

**Current Principal Place of Business:**

9876 HOLLY HILL DRIVE  
BOYNTON BEACH, FL 33437

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 741585  
BOYNTON BEACH, FL 33474

**New Mailing Address:**

**FEI Number:** 75-3062159

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCWILLIAMS, MARK D  
C/O ERIK EDWARD JOH, P.A.  
4600 NORTH OCEAN BLVD STE 206  
BOYNTON BEACH, FL 33435 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GELFAND, JUSTIN  
Address: 9 VIA DE CASAS SUR UNIT 102  
City-St-Zip: BOYNTON BEACH, FL 33426

Title: DST  
Name: GELFAND, JASON  
Address: 9876 HOLLY HILL DRIVE  
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby 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 all other like empowered.

SIGNATURE: JUSTIN GELFAND

PD

02/01/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date