

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

05-12-2003 90205 006 ***80.00
P02000029976
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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DOCUMENT # P02000029976

1. Entity Name
AUDIOTOUGH, INC.



Principal Place of Business
1633 COPPERSMITH COURT
LUTZ FL 33559

Mailing Address
1633 COPPERSMITH COURT
LUTZ FL 33559

3202 COUNTRYSIDE BRANDON FL 33511



5/103 60114 024 67.00

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

TAMPA

3202 COUNTRYSIDE ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

BRANDON

BRANDON

City & State

City & State

BRANDON FL

BRANDON FL

Zip

Country

Zip

Country

33511

US

33511

US

4. FEI Number

030409974

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COSTA, COREY

1633 COPPERSMITH COURT 3202 COUNTRYSIDE ST

LUTZ FL 33559

BRAND FL 33511

Name

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

City

FL

Zip Code

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

Corey Costa

5-1-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
COSTA, COREY
1633 COPPERSMITH COURT 3202 COUNTRYSIDE ST
LUTZ FL 33559 BRANDON FL 33511

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

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☐ Change ☐ Addition

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:

Corey Costa

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-03

813-784-9111

Date

Daytime Phone #

CR2E034 (10/02)