2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048123

Entity Name: ECO-SOUND ENTERPRISES, INC.

FILED Jan 15, 2005 Secretary of State

Current F				
Current Principal Place of Business:			New Principal Place of Business:	
	ORSESHOE TR ALM BEACH, F			
Current N	Mailing Addre	ss:	New Mailing Address	:
	ORSESHOE TR ALM BEACH, F			
FEI Numbe	r: 05-0555079	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address of	New Registered Agent:
WEST PA	DRSESHOE TF ALM BEACH, F	L 334144053 US	nurness of changing its registers	Loffice or registered egent, or both
	e named entity te of Florida.	submits this statement for the p	purpose of changing its registered	I office or registered agent, or both,
SIGNATU	IRE:			
SIGNATU		nic Signature of Registered Ag	ent	Date
	Electro	nic Signature of Registered Ag	ent	Date
	Electro	ng Trust Fund Contribution().		Date S TO OFFICERS AND DIRECTOR
Election Ca OFFICER Title: Name: Address:	Electro Ele	ng Trust Fund Contribution (). CTORS:) Delete	ADDITIONS/CHANGE	
Election Ca	Electro Ele	rg Trust Fund Contribution (). CTORS:) Delete SHOE TRACE BEACH, FL 33414) Delete LIP P	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	S TO OFFICERS AND DIRECTOR
Election Ca OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electro Ele	Trust Fund Contribution (). CTORS:) Delete SHOE TRACE BEACH, FL 33414) Delete LIP P SHOE TRACE BEACH, FL 33414) Delete GEACH, FL 33414	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	S TO OFFICERS AND DIRECT

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: PHILIP P MACNAK ST 01/15/2005