2005 FOR PROFIT CORPORATION

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 20, 2005 8:00 am Secretary of State ANNUAL REPORT 04-20-2005 90365 038 ***150 00 **DOCUMENT # P02000050669** AMERICA'S SOUND, INCORPORATED 50041458 Principal Place of Business Mailing Address 1271 S MILITARY TR 15653 BENT CREEK ROAD WEST PALM BEACH, FL 33415 WELLINGTON, FL 33414 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. Chg-P 01142005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 04-3655471 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HALUM, NASSER D Street Address (P.O. Box Number is Not Acceptable) 15653 BENT CREEK ROAD WELLINGTON, FL 33414 City Zio 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE **PVST** ☐ Delete TITLE ☐ Chance Addition HALUM, NASSER D NAME NAME 15653 BENT CREEK ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WELLINGTON, FL 33414 CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition NAME HALUM, NASSER D NAME 15653 BENT CREEK ROAD STREET ADDRESS STREET ADDRESS WELLINGTON, FL 33414 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ■ Addition NAMF NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP ∵ie : TITLE □ Delete mu:C Tiatles Funds and Grouph a United Figure NAME NAME 1 36 ... each filing. STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP : el leuible-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 in changed, or on an attachment with an address, with all other like empowered.

FILED