2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013878

Entity Name: NETWORK SOUND, INC.

FILED Apr 01, 2005 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

2520 CR 427 NORTH, SUITE 100 2520 N RONALD REAGAN BLVD, STE 100 LONGWOOD, FL 32750

LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

2520 CR 427 NORTH, SUITE 100 2520 N RONALD REAGAN BLVD, STE 100

LONGWOOD, FL 32750 LONGWOOD, FL 32750

FEI Number: 22-2673444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FERA, RHONDA FERA, RHONDA

2520 CR 427 NORTH, SUITE 100 2520 N RONALD REAGAN BLVD, STE 100

LONGWOOD, FL 32750 LONGWOOD, FL 32750 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: 04/01/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

FERA, VITO FERA, VITO Name: Name:

2520 CR 427 NORTH, SUITE 100 Address: 2520 N RONALD REAGAN BLVD, STE 100 Address:

City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: Title: (X) Change () Addition () Delete

Name: FERA, RHONDA Name: FERA, RHONDA

2520 CR 427 NORTH, SUITE 100 Address: 2520 N RONALD REAGAN BLVD, STE 100 Address:

LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750 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: RHONDA S FERA 04/01/2005 TREA