

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000031880

Entity Name: AUDIO EASE, INC.

FILED  
Aug 29, 2006  
Secretary of State

## Current Principal Place of Business:

4310 WOODSIDE MANOR DR  
TAMPA, FL 33624

## New Principal Place of Business:

11123 NORTH DALE MABRY HWY  
TAMPA, FL 33618

## Current Mailing Address:

4310 WOODSIDE MANOR DR  
TAMPA, FL 33624

## New Mailing Address:

11123 NORTH DALE MABRY HWY  
TAMPA, FL 33618

FEI Number: 56-2363017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

JONES, BRENT A ESQ.  
220 S. FRANKLIN STREET  
TAMPA, FL 33602 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HAYES, CHRISTIAN M  
Address: 4310 WOODSIDE MANOR DR  
City-St-Zip: TAMPA, FL 33624

Title: VPS ( ) Delete  
Name: CHANG, ANDREA M  
Address: 2406 KENWICK DR.  
City-St-Zip: VALRICO, FL 33594

Title: T ( ) Delete  
Name: HAYES, KENNETH S  
Address: 4310 WOODSIDE MANOR DR.  
City-St-Zip: TAMPA, FL 33624

Title: D ( ) Delete  
Name: HAYES, DENNIS J  
Address: 2 CENTENNIAL DR.  
City-St-Zip: CENTERVILLE, NY 10923

Title: D (X) Delete  
Name: HAYES, PATRICIA  
Address: 2 CENTENNIAL DR.  
City-St-Zip: CENTERVILLE, NY 10923

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: HAYES, PATRICIA  
Address: 2 CENTENNIAL DR.  
City-St-Zip: CENTERVILLE, NY 10923

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ANDREA CHANG

VPS

08/29/2006

Electronic Signature of Signing Officer or Director

Date