2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P04000062117 02-14-2005 90052 038 ***150.00 SUPERSONIC ELECTRONICS, INC. Mailing Address Principal Place of Business 7115 13TH ST EAST 7115 13TH ST EAST 40018012 SARASOTA, FL 34243 SARASOTA, FL 34243 3. Mailing Address 2. Principal Place of Business 5131 H. Tamiami 5131 N Suite, Apt. #, etc. Suite, Apt. #, etc 01292005 CR2E034 (10/03) City & State 4. FEI Number 34 - 1996622 FEI Number Applied For City & State 70x0x20 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired 23∪ Fee Required <u> 2702211</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 City Zip Code FL 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) DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FiLE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition TITLE PVST ☐ Delete TITLE GARCIA BELISARIO, RUBEN D NAME NAME 7115 13TH ST EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA, FL 34243 CITY-ST-7IP ☐ Defete ☐ Change Addition D TITLE TITLE GARCIA BELISARIO, RUBEN D NAME NAME STREET ADDRESS 7115 13TH ST EAST STREET ADDRESS SARASOTA, FL. 34243 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition . Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of 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 address, with all other like empowered SIGNATURE:

FILED

Feb 14, 2005 8:00 am