

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 02, 2005 8:00 am
Secretary of State

05-02-2005 90494 033 ***150.00

DOCUMENT # P04000126861

1. Entity Name
REVELATION AUDIO LABS, INC.



Principal Place of Business
**24 EASTMOOR LANE
PALM COAST, FL 32135-4061**

Mailing Address
**PO BOX 354061
PALM COAST, FL 32135-4061**

66020799



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04292005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

20-2179049

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KNIGHT, JERRY C
4721 E MOODY BLVD
BLDG 5 SUITE 505 & 506
BUNNELL, FL 32110**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip 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

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature must appear with this filing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DPST
VOJTECH, BRADLEY
24 EASTMOOR LANE
PALM COAST, FL 321354061** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Bradley J. Vojtech **BRADLEY VOJTECH**

04-29-05 386 437-5523

SIGNATURE (PRINTED OR TYPED NAME OF SIGNING OFFICER OR DIRECTOR)

DATE

TELEPHONE #