2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 12, 2006 8:00 am Secretary of State 07-12-2006 90008 038 ***150.00

| 1. Entity Nar | MENT # P05000012 PONE AUDIO, INC. | 2493 | | | | 07-12-2006 | 90008 038 *** | 150.00 | |
|---|--|---|---|---|-------------------------|-------------------------------|---|--|--|
| Principal Plac | ce of Business | Mailing Address | | | 1 | อบ | Upera | | |
| 1 | | 1102 MURRAY DR | | | (| | | | |
| 1102 Murray Dr Jacksonville, fl 32205 | | JACKSONVILLE, FL 32205 | | | | 4 | | | |
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| 2. Principal Place of Business | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | - | | | | | |
| | | | | | 07052006 | Chg-P | CR2E034 (11/ | 05) | |
| City & Sta | le | City & State | | | 4. FEI Number | | | Applied For | |
| 7:- | | 7:- | 1 0 | | 20-22 | 23219 | | Not Applicable | |
| Zip | Country | Zip | Country | | 5. Certificate o | f Status Desired | □ \$8.75 | Additional | |
| | 6. Name and Address of Current | Registered Agent | 1 | | 7. Name and A | ddress of New I | Registered Agent | | |
| | | | N | lame | | | | | |
| WILLIAMS, TIMOTHY | | | - | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| 1102 MURRAY DR JACKSONVILLE, FL 32205 | | | | Street Address (M.O. Box Number is Not Acceptable) | | | | | |
| 0,10110011 | 17122,12 02200 | | | | | | | | |
| | | | C | City | _ | | FL Zip | Code | |
| 0.71 | | | | | | | <u> </u> | | |
| | named entity submits this statement for tions of registered agent. | r the purpose of changing its | registerea o | office or register | ed agent, or both | in the State of F | lorida. I am familiar v | with, and accept | |
| | | | ≥`` | | | | 12/20/ | ~ _ | |
| SIGNATURE. | Signature, typed or printed name of registered agent | and title of anoticable (INCT) | | | | | - ipe | | |
| f | - v v | BIO SINE II EDPHICADIG. (1407) | E Registered Age | ent signature required | when reinstating) | | DATE | • | |
| | LE NOW!!! FEE IS \$150.00 ue by September 6, 2006 | 9. Election Campai Trust Fund Contr | ign Financing | g _ \$5. | 00 May Be | In accordance corporation did | with s. 607.193(2) | b), F.S., the or notice. | |
| | LE NOW!!! FEE IS \$150.00 | 9. Election Campai Trust Fund Contr | ign Financing | g _ \$5. | 00 May Be ed to Fees | corporation did | with s. 607.193(2) | or notice. | |
| D | LE NOW!!! FEE IS \$150.00 ue by September 6, 2006 | 9. Election Campai Trust Fund Contr | ign Financinç ribution. | g _ \$5. | 00 May Be ed to Fees | corporation did | not receive the pr | ORS IN 11 | |
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR