

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000038380

Entity Name: UNITED SOUNDS, INC.

FILED
Jun 29, 2007
Secretary of State**Current Principal Place of Business:**6187 N.W. 167TH STREET
#H28
MIAMI, FL 33015**New Principal Place of Business:****Current Mailing Address:**6187 N.W. 167TH STREET
#H28
MIAMI, FL 33015**New Mailing Address:**

FEI Number: 20-2511978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:PENA, JOSE A
6187 N.W. 167TH STREET
#H28
MIAMI, FL 33015 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

OFFICERS AND DIRECTORS:Title: P () Delete
Name: RIVERA, MIGUEL
Address: 6187 N.W. 167TH STREET
City-St-Zip: MIAMI, FL 33015Title: VP () Delete
Name: CAMACHO, LEOPOLDINA
Address: 6187 N.W. 167TH STREET
City-St-Zip: MIAMI, FL 33015Title: S () Delete
Name: QUINONES, XIOMARA
Address: 6187 N.W. 167TH STREET
City-St-Zip: MIAMI, FL 33015Title: T () Delete
Name: LEON, SAHYLI
Address: 6187 N.W. 167TH STREET
City-St-Zip: MIAMI, FL 33015**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: P (X) Change () Addition
Name: QUINONES, XIOMARA
Address: 6187 N.W. 167TH STREET
City-St-Zip: MIAMI, FL 33015Title: () Change () Addition
Name:
Address:
City-St-Zip: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 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: XIOMARA QUINONES

P/S

06/29/2007

Electronic Signature of Signing Officer or Director

Date