

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

DOCUMENT # P05000074668



1. Entity Name
SOUNDTECH CORPORATION

04-24-2006 90392 012 ***150.00

Principal Place of Business
11707 LAKEVIEW DRIVE
LEESBURG, FL 34788

Mailing Address
11707 LAKEVIEW DRIVE
LEESBURG, FL 34788

40057365



2. Principal Place of Business
9805 Alaska Circle
Suite, Apt. #, etc.

3. Mailing Address
9805 Alaska Circle
Suite, Apt. #, etc.

04062006 Chg-P CR2E034 (11/05)

City & State
Boca Raton, FL
Zip
33434
Country
USA

City & State
Boca Raton, FL
Zip
33434
Country
USA

4. FEI Number
20-2887301
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLANAGIN, CAROLYN
9805 ALASKA CIRCLE
BOCA RATON, FL 33434

7. Name and Address of New Registered Agent

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DPT	<input type="checkbox"/> Delete
NAME	FLANAGIN, BRENT	
STREET ADDRESS	11707 LAKEVIEW DRIVE	
CITY-ST-ZIP	LEESBURG, FL 34788	
TITLE	DS	<input type="checkbox"/> Delete
NAME	FLANAGIN, CAROLYN	
STREET ADDRESS	9805 ALASKA CIRCLE	
CITY-ST-ZIP	BOCA RATON, FL 33434	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DPT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Additi
NAME	Flanagin, Brent	
STREET ADDRESS	9805 ALASKA CIRCLE	
CITY-ST-ZIP	Boca Raton, FL 33434	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Additi
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing 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 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

Date

Daytime Phone #

4/19/06