


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2006 8:00 am
Secretary of State

04-27-2006 90217 007 ***158.75

DOCUMENT # P05000078714		
1. Entity Name AUDIO KINGDOM SOUND CORP.		

Principal Place of Business 1070 EAST CARROLL STREET KISSIMMEE, FL 34744	Mailing Address 1070 EAST CARROLL STREET KISSIMMEE, FL 34744
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2. Principal Place of Business SAME T	3. Mailing Address SAME T
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country



04222006 Chg-P CR2E034 (11/05)

6. Name and Address of Current Registered Agent MOLINA, ALEX 5950 BENT PINE DRIVE APT. 251 ORLANDO, FL 32822	
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7. Name and Address of New Registered Agent Name <u>Molina Alex</u> Street Address (P.O. Box Number is Not Acceptable) <u>5996 Bent Pine</u> City <u>Orlando</u> FL Zip Code <u>32822</u>	
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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: <u>Alex Molina President</u> DATE: <u>04.22.06</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	
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FILE NOW!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
P MOLINA, ALEX 5950 BENT PINE DRIVE, APT. 251 ORLANDO, FL 32822	
D SOTO-PEREZ, VALERIE 814 NELSON DRIVE KISSIMMEE, FL 34758	<input checked="" type="checkbox"/> Delete
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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

SIGNATURE: <u>Alex Molina President</u> DATE: <u>04.22.06</u> (321) 697-0090 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>
