FILED Aug 22, 2007 8:00 am Secretary of State

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2007 FOR PROFIT CORPORATION
ANNUAL REPORT

07-18-2007 90046 047 ***150.00 **DOCUMENT # P06000018280** 1. Entity Name SNIPER SOUND SYSTEM INTERNATIONAL, INC. Principal Place of Business Mailing Address REN21262 306 CORDOVA ROAD **306 CORDOVA ROAD** AUBURNDALE, FL 33823 AUBURNDALE, FL 33823 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite Ant # etc. 07112007 Chg-P CR2E034 (12/06) City & State City & State Applied For Not Applicable Zio Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 City Zip Code FL 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 ade it applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE-NOW!!! FEE IS \$150.00 \$5.00 May Bo In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 14, 2007 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete 11th F Change Addition JEFFREY, GREGORY JOHN HAME NAME STREET ADDRESS 306 CORDOVA ROAD STREET ADDRESS CITY.ST. 7P AUBURNDALE, FL 33823 CITY-ST-ZIP TITLE Delete FITLE ☐ Addition ☐ Chance NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZP TITLE Oelete Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY. \$1.29 CITY-SI-ZP TITLE Delete THLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZP TITLE TOLE Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP 117LE Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-51-7# CITY. \$1.7P 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 it made under oath; that I am an officer or director of the corporation or the receiver or trustee employered to execute this report or School Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with all other like employered. 1/11/04 868-551-1635 Yesiden