## **2007 FOR PROFIT CORPORATION** ANNUAL REPORT

## Apr 26, 2007 8:00 am Secretary of State **DOCUMENT # P06000092612** 1. Entity Name 04-26-2007 90217 011 \*\*\*158.75 IRON AUDIO, INC. Principal Place of Business Mailing Address 15201 SW 51 STREET 4839 SW 148 AVENUE DAVIE, FL 33331 #331 **DAVIE, FL 33330** 在 多次 2. Principal Place of Business No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04252007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 20-5191912 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name STUDENBERG, DAUS Street Address (P.O. Box Number is Not Acceptable) 15201 SW 51 STREET **DAVIE, FL 33331** City 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 STUDENBERG PRESERVI 4 SIGNATURE Signature, typegor print red agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, P.D TITLE ☐ Addition ☐ Delete TITLE ☐ Change STUDENBERG, DAUS NAME STREET ADDRESS 15201 SW 51 STREET STREET ADDRESS CITY-ST-ZIP **DAVIE, FL 33331** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete πLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ΠΠF Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ACCORESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby 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.

CICMATIDE.

DAUS STUDENBERG (PRESCORNT)