FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996		DIVISION OF	CORPOR/		NS									
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Principal Place	of Business		Mailing Address												
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Zip _		Country	Zip	Cou				8. This c	orporation	has liability			x under s	199.03	2,
24 9120		5 Los Angeles	29 91201-5025	30/20	S	HNOR	2/65	1	Statutes		Yes [
	g, Name i	and Address of Current	Registered Agent		B1	Name		10. Name	ana Aac	dress of No	ew Heg	Stereo	48eur		
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CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD						Street	Addres	ss (P.O. Box				» <i>-</i> -	x		
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					84	City			**200			<u> </u>		ip Code	
44 Duraupat t	o the provisio	no of Sections 607 0502	and 607.1508, Florida Statute	se the abo	WA-0	emed co	ornorat	ion submits	this state	ment for the	e nurno	se of cha	naina its	registere	d office
or registere	ed agent, or b	ooth, in the State of Florida	a. Such change was authorize in 607.0505, Florida Statutes	ed by the (corp	oration's	board	of directors	. I hereby	accept the	appoint	Irnent as	registere	d agent.	am
SIGNATURE	is, and accept	t the boligations of, occito	11 007.0000, 1 101103 01414100	-											
SIGNATORE _	Signature, typed o	r printed name of registered agent ar			Agen	l signa' re r	requirad v	vhen reinstating)				DATE	DIDEAT	000 11.4	
12.		OFFICERS AND	DIRECTORS DELETE	13.	13.			ADDIT	IONS/CH	ANGES TO	OFFICE		Change		
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6.4 CITY-ST-ZIP PACIFIC PALISADES CA 14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

5.2 NAME

6. 1 TITLE

6 2 NAME

5 4 CITY - ST- ZIP

6.3 STREET ADDRESS

SIGNATURE:

CURTIS, VERN O.

STEELE, JACK D.

1625 MICHAEL LANE

4111 STILLWATER DRIVE

HUNTINGTON BCH CA

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELE"E

4-11-96 (818) 244-8080

15213 Niv Francesca

Portland

☐ Addition

CR2E034 (12/95)