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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000006124 (0) **DOCUMENT #** 1. Corporation Name

ACOUSTIC ART CREATIONS, CORPORATION

Р

rincipal Place	of Business	Mailing Address							
13130 N.W. 1 SUNRISE FL		13130 N.W. 11TH DRIVE SUNRISE FL 33323							
					3. Date incorporated or Qualified 01/21/1993				
Principal Pla	ice of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For		
$\vec{0}$		26	26		65-0385845		Not Applicable		
Suite, Apt. #	I, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Zip	Country			~	inder's 199.032,		
ı 📗	25		<u> </u>				<u> </u>		
	g. Name and Address of Curre	nt Registered Agent	3. Date incorporated or Qualified 01/21/1993 3. Date incorporated or Qualified 06/07/1995 4. FEI Number 65-0385845 Set 1. FEI Number 65-0385845 Set 2. Certificate of Status Desired 18.75 Additional Fee Required 6. Election Campaign Financing 185.00 May Be 7 Trust Fund Contribution 185.00 May Be 7 Trust Fund Contribution 185.00 May Be 7 Trust Fund Contribution 195.00 May Be 7 Trust Fund Statutes 195.00 May Be 7 Trust Fund Statutes 195.00 May Be 7 Trust Fund Contribution 195.00						
			81	Name					
GANCI, JOSEPH 13130 N.W. 11TH DRIVE			82	Street Addres	Address (P.O. Box Number is Not Acceptable)				
SUNRISI	25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name N.W. 11TH DRIVE SE FL 33323 83 84 City Res Code								
			84	City			85 Zip Code		
			!L			• • • •			
or registere	o the provisions of Sections 607.050 ed agent, or both <i>i</i> n the State of Floi h, and a cept // i ligations of, Sec	rida. Such change was authorized by	ie above-na y the corpoi	amed corporat ration's board	ion submits this statement for the pur of directors. I hereby accept the appx	pose of chang pintment as re	ing its registered office gistered agent. I am		
SIGNATURE	Anos Hanci Yo	esident				1/12/96	o		

12.	Signard Spector of ed name or registered agent and title if applicable. (NO OFFICERS AND DIRECTORS		Tt: Registered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	b	DELETE	1, 1 TITLE		Addition	
NAME	GANCI, JOSEPH	_	1.2 NAME			
STREET ADDRESS	13130 NW 11TH DRIVE		1.3 STREET ADDRESS			
CHTY-ST-ZiP	SUNRISE FL 33323		1.4 CITY - ST - ZIP			
TITLE	D	☐ DELETE	2 1 TITLE	Change	Addition	
NAME	GANCI, CIRO JR	_	2.2 NAME			
STREET ADDRESS	4941 SW 88TH TERRACE		2 3 STREET ADDRESS			
CITY-ST-ZIP	COOPER CITY FL 33328		2 4 CITY-ST-ZIP			
TITLE		☐ DELÉTÉ	3. 1 TifLE	Change	Addition	
NAME		*	3 2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY - ST - ZIP			
TITLE		DELETE	4. 1 TITLE	☐ Change ☐	Addition	
NAME		-	4.2 NAMÉ			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5. 1 TITLE	Change] Addition	
NAME		_	5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELE1E	6 1 TITLE	Change [Addition	
NAME			62 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-7IP			6.4 CITY-ST-ZIP			

14. Ido 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 fin an attachment with an address.

SIGNATURE:

TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/96 305 341 0848