

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 31, 1995. AMOUNT DUE ON OR BEFORE 8/31/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REISSUE STATE: \$225)**

APPROVED AND FILED

05 JUL 28 PM 4:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE.

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morikiam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000079439 (4)

1. Corporation Name  
HEAR TRONICS, INC.

Principal Place of Business Mailing Address  
7972 A LEXINGTON CLUB BLVD. 7972 LEXINGTON CLUB BLVD.  
DELRAY BEACH FL 33446 DELRAY BEACH FL 33446  
US US

3. Date Incorporated or Qualified 3a. Date of Last Report  
11/12/1993 03/23/1994

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip Country 28 Zip Country

4. FEI Number 65-0504209 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GASOJ, MILTON A  
7749-B LEXINGTON CLUB BLVD  
DELRAY BEACH FL 33446

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME NEUMAN, SANDRA  
STREET ADDRESS 7972-A LEXINGTON CLUB BLVD  
CITY, ST, ZIP DELRAY BEACH FL 33446

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY, ST, ZIP

TITLE D  
NAME NEUMAN, BERNARD  
STREET ADDRESS 7972-A LEXINGTON CLUB BLVD  
CITY, ST, ZIP DELRAY BEACH FL 33446

21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY, ST, ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY, ST, ZIP

14. I 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.

SIGNATURE:

*Sandra Neuman*  
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Date Day/Month/Year

CR2E034 (3/95)