FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000080323 (7)

AUTO SOUND 1, INC.

| | | | | | | | J a f ari kali i | | AB HILLIAN |
|---|--|--|--|--------------|--------------------|---|-------------------------|---------------|----------------|
| Principal Place of Business Mailing Address | | | | | | I SARILARI VIA (BIRA 1915 GAIN GANN ARIN ANNE IDNY BRIOD IVIN 11044 MIN 1401 | | | |
| 1371 N.E. 163 | TH STREET | 1371 N.E. 163TH STREE | ET | | | | | | |
| #11S #11S | | | | ٠, | | | | | |
| NORTH MIAMI | BEACH FL 33162-4689 | NORTH MIAMI BEACH ! | FL 33102402 | | | 3. Date Incorporated or Qualified | T 3a . Da | te of Last R | Penort |
| | | | | | | 11/19/1993 | | 18/1996 | 10,0011 |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | | 4. FEI Number | | Aı | pplied For |
| 21 | | 26 | | | | 65-0450586 | | No. | ot Applicable |
| Suite, Apt | #, etc. | Suite, Apt. #. etc. | Suite, Apt. #. etc. | | | 5. Certificate of Status Desired | | | Additional |
| 22 | | 27 | | | | Fee Required | | | |
| City & Stat | te | <u>├</u> ¬ ′ | City & State | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | |
| Zip | Country | 28 7in | Zip Country | | | | | | |
| 24 | 25 29 | | 30 | | | 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☐ No | | | |
| 24 | 9, Name and Address of Curi | | | | | 10. Name and Address of New Re | | | |
| RAA | AJOUR, ALI | | | 81 | Name | | | | |
| | 8 N.W. 174TH LANE | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | MI FL 33015 | | | 82 | 0.10017100 | Address (F.S. Box Humber is Not Acoptable) | | | |
| | | | | 83 | | | | | |
| | | | | 84 | City | | | 85 Zip | Code |
| 44 5 | | 500 - 14 003 4500 Flashe On | t too the of | | | to a hards this statement for the | FL | abanaina | ita ragiotarad |
| office or i | registered agent, or both, in the Sta am familiar with, and accept the ob | isuz and 607.1506, ribrida Sta ate of Florida Such change wa ligations of, Section 607.0505, | nutes, the at as authorized Florida Stat | d by utes | the corpora | rporation submits this statement for the pation's board of directors. I hereby acce | ot the app | ointment as | registered |
| SIGNATURE | | | | | | | | | |
| 10 | Signature, typed or printed name of registered | agons and Me Lappicable (N AND DIRECTORS | NOTE Registered | d Agr | ert signature requ | and when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE PERS AND | DIRECTOR | PS IN 12 |
| 12. | D OFFICERS / | DELETE | 11][| TI F | | ADDITIONS/CHANGES TO OFFIC | ALTO AND | Change | Addition |
| NAME | BAAJOUR, ALI | | 1.2 N/ | | | | | | |
| STREET ADDRESS | 6658 N.W. 174TH LANE | | | | ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI LAKES FL 33015 | | 14 CI | | 1 | | | | |
| THE | | DELETE | 21 TI | _ | | | | Change | Addition |
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| ₹fītE | | [_] DELETE | 4.1 TI | | | | | L Change | ∐ Addition |
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| NAME | | | 5.2 N/ | | *DDDCCC | | | | |
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| CITY-ST-ZIP TITLE | | DELETE | 5.4 CI 6.1 TI | | 1 · ZIP | | | Change | Addition |
| | | _ beette | 6.2 N/ | | | | | onungo | |
| NAME CTRCCI ADDRESS | | | | | ADDRESS | | | | |
| STREET ADDRESS | | | 0.3 \$1 | met l | HUUDEOO | | | | 1 |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

2/12/an /200)949-9121

FILED

Feb 17 1997 8:00am

Secretary of State

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