

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000009048 (7)**

1. Corporation Name

ACOUSTIC ENGINEERING, INC.



Principal Place of Business

Mailing Address

**125 S. SWOOPE AVENUE
SUITE 108
MAITLAND FL 32751
US**

**125 S. SWOOPE AVENUE
SUITE 108
MAITLAND FL 32751
US**

2. Principal Place of Business

2a. Mailing Address

21 115 Commerce Way

26 115 Commerce Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 City & State
23 Sanford, Florida**

**27 City & State
28 Sanford, Florida**

24 Zip 32771 25 Country USA

29 Zip 32771 30 Country USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HOARD, KALON
1131 ORANGEWOOD AVE
DELAND FL 32724**

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 **Kalon M. Hoard**

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

(NOTE: Registered Agent signature required when reinstating)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME KEM, STEPHEN
STREET ADDRESS 930 LIMWOOD AVE
CITY - ST - ZIP DELAND FL 32724

11 TITLE D
12 NAME WURL, DANIEL
13 STREET ADDRESS 2464 ALAQUA DRIVE
14 CITY - ST - ZIP LONGWOOD, FL 32779

TITLE D
NAME HOARD, KALON
STREET ADDRESS 1131 ORANGEWOOD AVE
CITY - ST - ZIP DELAND FL 32724

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

TITLE D
NAME RHODES, SCOTT
STREET ADDRESS 2619 GRAMERCY DR
CITY - ST - ZIP DELTONA FL 32738

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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Kalon M. Hoard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/3/96
Date

407-328-1065
Daytime Phone #

CR2E034 (3/96)