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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000038865 (9)

A.R.S. (AUDIO RECORDING SERVICES), INC.

Principal Place of Business Mailing Address 125\$ BELLE AVE. 1255 BELLE AVE. SUITE 164 SUITE 164 DO NOT WRITE IN THIS SPACE MINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708 3. Date Incorporated or Qualified 05/23/1994 2. Principal Place of Business 2a. Mailing Address Applied For 59-3362614 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 30 Personal Property Tax due June 30. Yes ☐ No 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KAUFMANN, PHIL 9361 TELFER RUN Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32817 83 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, typed or printed name of registered agent and title it applicable Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 TITLE Change Addition KAUFMAN, PHIL NAME 1.2 NAME 9361 TELFER RUN STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 32817 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition 2.1 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS

CITY-ST-ZIP 14. I 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 roport 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

3.4. CITY - ST - ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

44 CITY-ST-ZIP

4.1 TITLE 4. 2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

62 NAME

DELETE

DELETE

☐ DELETE

SIGNATURE:

TY-51-21P

STREET ADDRESS

CITY - ST - ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

FILED

May 06 1998 8:00am

Secretary of State

Addition

Addition

Addition

Change

Change