FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 APR 21 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000062246 (1)**

1. Corporation Name
SOUND WAVE PRODUCTIONS INC.

Principal Place of Business	Mailing Address
8731 SCHRADER BLVD. PORT RICHEY FL 34668	8731 SCHRADER BLVD. PORT RICHEY FL 34668

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/22/1994
3a. Date of Last Report: N/A

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: 59-3261682	☐ Applied For ☐ Not Applicable
21: N/A	26: N/A		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
22: N/A	27: N/A		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution NO ☐	$5.00 May Be Added to Fees
23: N/A	28: N/A		
Zip / Country	Zip / Country	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	
24: N/A / 25: N/A	29: N/A / 30: N/A		

9. Name and Address of Current Registered Agent

CRAWFORD, JOHN T III
8731 SCHRADER BLVD.
PORT RICHEY FL 34668

10. Name and Address of New Registered Agent

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

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: John T. Crawford III — JOHN T. CRAWFORD III President — 2-01-95
(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	PTD	11 TITLE	☐ Change ☐ Addition
NAME	CRAWFORD, JOHN T III	12 NAME	
STREET ADDRESS	8731 SCHRADER BLVD.	13 STREET ADDRESS: N/A	
CITY-ST-ZIP	PORT RICHEY FL 34668	14 CITY-ST-ZIP	
TITLE	VSD	21 TITLE	☐ Change ☐ Addition
NAME	CRAWFORD, KIARA M	22 NAME	
STREET ADDRESS	8731 SCHRADER BLVD.	23 STREET ADDRESS: N/A	
CITY-ST-ZIP	PORT RICHEY FL 34668	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME	N/A	32 NAME	
STREET ADDRESS		33 STREET ADDRESS: N/A	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME	N/A	42 NAME	
STREET ADDRESS		43 STREET ADDRESS: N/A	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME	N/A	52 NAME	
STREET ADDRESS		53 STREET ADDRESS: N/A	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME	N/A	62 NAME	
STREET ADDRESS		63 STREET ADDRESS: N/A	
CITY-ST-ZIP		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)(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.

SIGNATURE: John T. Crawford III — JOHN T. CRAWFORD III President — 2-01-95 — (813) 869-6494
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER OR MANAGING OFFICER OR DIRECTOR — Date — Daytime Phone #

0073361 CP