## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

\*PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

## P94000081872 (1) DOCUMENT # 1. Corporation Name

INTERNATIONAL OZ AUDIO CORP.

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Principal Place of Business Mailing Address					I IONICAGE IIO IONEL BERLIE	YMIEK MONIT MONIT MONDY TÔNDY NÌ ĐẠI ĐỊ	1111 <b>18518</b> 11 <b>81 188</b> 1	
1300 SW 10 STREET DELRAY BEACH FL 33444		1300 SW 10 STREET DELRAY BEACH FL 33	1300 SW 10 STREET DELRAY BEACH FL 33444					
5 Paris I Fa					3. Date incorporated or Q 11/08/1994	ualified 3a. Date of Last 04/28/18		
2. Principal Place of Business		2a. Mailing Address		1	4. FEI Number Applied For			
Suite, Apt. #, etc.			Suite, Apt. #, etc.		65-0545637	€0.7E		
22		27	<del> </del>		5. Certificate of Status Desired Fee Required			
City & State		City & State	City & State		6. Election Campaign Financing \$5.00 May Be			
23		28		Trust Fund Contribution LJ Added to Fees				
Zip <b>24</b>	Country 25		Zip Country 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			
[ [ [ ]	9. Name and Address of Currer				10. Name and Address o			
F T T T T T T T T T T T T T T T T T T T				1 Nam	***************************************	The Hogistone Agent		
WALTON	1, JOHN			2 Stree	t Address (P.O. Box Number is Not A	(coestable)		
1300 SW 10 STREET			Ĺ		occusion processing and acceptable)			
DELRAY	BEACH FL 33444		ε	13				
			ē	4 City		FL  85  2	Zip Code	
11. Pursuant t	to the provisions of Sections 607.0502 ed agent, or both, in the State of Flori	2 and 607.1508, Florida Statut	es, the above	-named	corporation submits this statement fo	r the rurneen of changing its	registered office	
ļamiliar wi	th, and accept the obligations of, Sect	tion 607.0505, Florida Statutes	жестру ине со 3.	трогацоп	s board or directors, i hereby accept	the appointment as registere	ed agent. I am	
SIGNATURE					7 To 10 10 10 10 10 10 10 10 10 10 10 10 10			
12.	Signature, typed or printed name of registered agent	Land the II applicable. (NO	TE: Registenco A	gent signatur	required when reinstating! ADDITIONS/CHANGES	DATE TO OFFICERS AND DIRECT	ORS IN 12	
TITLE	PRES	DELETE.	1. 1 TITE	E	DRGS.DON	Change		
NAME	WALTON, JOHN		. 1.2 NAM	£		· ·		
STREET ADDRESS 9755 WESTVIEW DRIVE #12126			1.3 STRE	1.2 NAME TONG WA GTON ST +2 1.3 STRET ADDRESS 1300 SW 1044 ST +2				
CITY-ST-7IP	CORAL SPRINGS FL		1.4 CITY	-ST-7IP	DGLRAY BEACH			
TIPLE	CEO	DELETE.	2.11ITa		vice ParsiDuni	Change	Addition	
NAME	FREEDLAND, ALLEN		2.2 NAM		Paul PREGOLAN 3011 DUPPERIN	0		
STREET ADDRESS 130 SW 10TH STREET #2 CITY-ST-ZIP DELRAY BEACH FL				E1 ADDRESS		1 9/	M6B354	
COTY-ST-ZIP TILLE	DELINAT BEACTIFE	☐ DELETE	3. 1 Till	-S]-ZP	Toponro, ONTAR	io Canado		
NAME		<u></u>	3 2 NAM			L. Origings	, C Mounton	
STREET ADDRESS				EET ADDRES				
CITY-S1-ZIP			3.4 CITY					
TILLE		☐ DELETE	4.1 T:TL			Change	Addition	
NAME			4.2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY - ST - ZIF		PAR DELETE	4.4 CI1Y					
TILE		DELETE	5. 1 TiTE			☐ Change	Addition	
NAME STREET ANDRESS			5.2 NAM		20000:	1834772		
STREET ADDRESS			•	ET ADORESS	-05/22/96-	1 <b>83477</b> 2 01055048		
CITY-ST-71° TITLE		[ ] DELETE	5.4 CITY 6. 1 TITL		***200.00	☐ Change	- [7] Addition	
NAME			6. 1 IIIL					
STREET ADDRESS				et address			_	
CITY-ST-Z₽			64 CHY			-1-960	The I	
	u certify that the information cumuliaria	unth this files is valueted in fine			int filter the commutation state of in Cont	110 07/01/15	-	

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 included 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 eath: that I am an officer or sirreltor 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 11 if changed, ordin an attachment with an oddress.

SIGNATURE: