

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

9/10-98

FILED

98 MAY 18 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998

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



DOCUMENT # *PA400008449*
1. Corporation Name: **AUTO SOUND OF MIAMI INC.**

Principal Place of Business: **7900 N.W. 29th MIAMI FL. 33147**
Mailing Address: **AVE. #200**

REINSTATEMENT *9/10-98*

2. Principal Place of Business (21-24)
2a. Mailing Address (26-30)

3. Date Incorporated or Qualified: **11-16-94**
4. FEI Number: **65-0539009**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**Imad J. Baajour
560 South Park Rd. # 7-23
Hollywood Fl. 33021**

10. Name and Address of New Registered Agent (81-85)

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: *Imad J. Baajour* (04-14-98)

12. OFFICERS AND DIRECTORS

TITLE	President Direct.	<input type="checkbox"/> DELETE
NAME	Imad J. Baajour	
STREET ADDRESS	560 S. Park Rd. # 7-23	
CITY-ST-ZIP	Hollywood Fl 33021	
TITLE	Secretary	<input type="checkbox"/> DELETE
NAME	Same as above	
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	400002528534--3
14 CITY-ST-ZIP	-05/19/98--01029--005
21 TITLE	****600.00 <input type="checkbox"/> ****800.00
22 NAME	
23 STREET ADDRESS	400002528534--3
24 CITY-ST-ZIP	-05/19/98--01029--006
31 TITLE	****150.00 <input type="checkbox"/> ****150.00
32 NAME	
33 STREET ADDRESS	400002528534--3
34 CITY-ST-ZIP	-05/19/98--01029--007
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption on stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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: *[Signature]* **3-15-98 (30) 694-0196**

CR2E034 (10/97)