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

DOCUMENT #

P95000036917 (9)

UNIQUE DECIBEL ELECTRONICS, INC.

Principal Place of Business Mailing Address

35 N.W. 76TH COURT
MIAMI FI 33126

MIAMI FI 33126



MIAMI FL 33		MIAMI FL 33126							
						3. Date Incorporated or Qualified 05/10/1995	3a. Date	of Last	Report
2. Principal Plac	e of Business	2a. Mailing Address 26			4. FEI Number 65-05789	1		Applied For Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			75 Additional a Required	
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zφ	Country	Zip	Cour	ntry		· · · · · · · · · · · · · · · · · · ·	intangible tax	under	s 199.032,
24	25	29	30			Florida Statutes Yes			
	9. Name and Address of Curren	it Registered Agent		81	Name	10. Name and Address of New F	registered A	gent	
				ا"					
DUARTI				82	Street Addr	ess (P.O. Box Number is Not Acceptal	ole)		
	. 76TH COURT		}	83					
MIAMI I	FL 33126							r r	
				84	City		FL	85	Zip Code
familiar with	, and accept the obligations of, Sect	ion €07.0505, Florida Statutes	.			rd of directors. I hereby accept the app	DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OF			
TITLE	PD	DELETE	1, 1 70				L] Chang	ge 🔲 Addition
NAME	DUARTE, LUIS		1,2 NA						
STREET ADDRESS	35 N.W. 76TH COURT				ADDRESS				
CITY-ST-ZIP					ST - 21P			7 Chan	ge Addition
TITLE	SD Duarte, Rebecca	-		2 1 TULE 22 NAME			L.	J	,
NAME STREET ADDRESS	35 N.W. 76TH COURT			2 3 STREET ADDRES					
CITY-ST-ZIP	MIAMI FL 33126				ST-ZIP				
TITLE	DELETE			3 1 1/1/1/				Chan	ge 🔲 Addition
NAME			3 2 NA	4.41	ļ				
STREET ADDRESS					EL ADDRESS				
CITY-ST-ZIP		FI DOLLIE			ST - ZIP			7 Chan	ge Addition
TITLE		☐ DELETE	4 1 T				L	7 0.18-1	8º FT Machail
NAME OXCEPT A DEDECTO			4.2 N		T ADDRESS				
STREET ADDRESS					ST-ZIP				
CHTY+\$1+ZHP THTLE		☐ DELETE	5 1 7					Chan	ge 🔲 Addition
NAME			5 2 N	AME					
STREET ADDRESS			5.3 \$	TREE	1 ADDRESS				
CITY-ST-ZIP					S1-ZIP			7 6	F-1 4.3391
TITLE		DELETE	6. 1 T				Į.	Chan	ge [] Addition
NAME			62 N						
STREET ADDRESS					T ADDRESS				
CITY-ST-ZIP			64C	ıΤΥ·	ST-7IP		0.03/0/43/5		

14. I do hereby certify that the information supplied with this filling 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 angular lesson to supplie mental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the desirence or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter on an attackment with an address.

SIGNATURE:

TATURE AND TYPES ON THATED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96 305-261-0624