

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

09-10-2004 90001 028 ***150.00

DOCUMENT # P95000081998

1. Entity Name
SOUND MOVES, INC.



Principal Place of Business

**8611 NW 72ND ST
MIAMI, FL 33166 US**

Mailing Address

**POST OFFICE BOX 3318
KEY LARGO, FL 33037**

54072279



2. Principal Place of Business

**820 LAWRENCE AVE
Suite, Apt. #, etc.**

3. Mailing Address

**P.O. Box 117
Suite, Apt. #, etc.**

09022004

Chg-P

CR2E034 (10/03)

City & State

**LAWRENCE, NY
Zip 11509 Country USA**

City & State

**ATLANTIC BEACH, NY
Zip 11509 Country USA**

4. FEI Number

65-0615604

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**THOMES, TIMOTHY N
99198 OVERSEAS HIGHWAY STE 8
KEY LARGO, FL 33037**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **WOOD, DUANE R**
STREET ADDRESS **1504 SHAW DR**
CITY-ST-ZIP **KEY LARGO, FL 33037**

TITLE **D** ☐ Delete
NAME **WAYDE, DANIEL**
STREET ADDRESS **187 BAYSIDE DRIVE**
CITY-ST-ZIP **ATLANTIC BEACH, NY 11509**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **DANIEL, WAYDE H**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Mary Daniel **MARY DANIEL**

8-29-04

516-239-5250

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment

54072279

Sound Moves Inc.
220 Lawrence Ave.
Lawrence, NY 11559
Tel: 516-239-5250 Fax: 516-239-4865
e.mail mary.daniel@soundmoves.com

September 2, 2004

Florida Department of State
Division of Corporations
2670 Executive Center Circle
Suite 100
Tallahassee, FL 32301

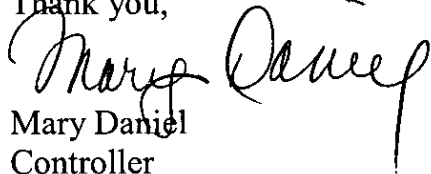
RE: DOCUMENT NO. P95000081998

To Whom It May Concern:

Please be advised that we have not received the annual report required for this year. Current information has been supplied and is accompanied by the required fee of 150.00.

Kindly send all correspondence to the amended address.

Thank you,


Mary Daniel
Controller