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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000041967 (6)

HEADROOM SOUND & VIDEO, INC.

Mailing Address Principal Place of Business 7837 W SAMPLE ROAD STE 130 7837 W SAMPLE ROAD STE 130 CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065-4749 3. Date Incorporated or Qualified 3a. Date of Last Report 05/16/1996 2a. Mailing Address 4. FEI Number Applied For 2, Principal Place of Business 65-0675419 26 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 23 Country Ζiρ Country Zip This corporation has liability for intangible tax under s. 199.032, Yes INO Florida Statutes 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 FORZANO, GABRIEL J 7837 W SAMPLE ROAD STE 130 82 Street Address (P.O. Box Number is Not Acceptable) CORAL SPRINGS FL 33065 83 84 City Zip Code 11. Pursuant to the provisions of Soctions 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. Change Addition DELETÉ 1.1 TOLE TITLE FORZANO, GABRIEL J 1.2 NAME . NAME 8433 FOREST HILLS BLVD #301 1.3 STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33065** CITY-SY-ZIF 1.4 CITY-ST-ZIP Change Addition DELETE 21 1III F TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE NAME 3.2 NAME 3.8 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 4.4 TITLE NAME 4.2 NAME STREET ADDRESS 4.8 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TILL NAME 5.P NAME STREET ADDRESS **5.8 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE TITLE 61 TITLE 62 NAME NAME **GB STREET ADDRESS** STREET ADDRESS

6.4 CHY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify to the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplicipental 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 occeiver or trusted empowered to excent this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address. 420-97

**FILED** 

May 07 1997 8:00am

Secretary of State