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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000056141 (0)

BOCA SOUND SOLUTIONS, INC.

FILED Apr 13 1998 8:00am Secretary of State

|--|--|

Principal Place	of Business	Mailing Address							
401 N.E. 37TH	I STREET	401 N.E. 37TH STREET							
BOCA RATON	FL 33431	BOCA RATON FL 33431				DO NOT WRITE IN THIS	CDACE		
							SEACE		
						3. Date Incorporated or Qualified			
Oringing! Pl	ace of Business	2a, Mailing Address				07/01/1996 4. FEI Number		T	Bad Car
z, milicipal m	ace of business	- ⊢ - '				**	-	-	lied For
Cuite Ant	4 010	Suite, Apt. #, etc.				65-0682586			Applicable
Suite, Apt. 4	#, etc.	<u> </u>				5. Certificate of Status Desired	•	/OA0	dditional
City & State		City & State							' _
¬ ·	,	<u> </u>				6. Election Campaign Financing Trust Fund Contribution			May Be
3 Zip	Country	28 Zip	Countr					ded to	
	 1	├ ¬ ' ├	30	,		 This corporation owes or has paid the c Personal Property Tax due June 30. 	Urrent yea		_
<u></u>	25 g. Name and Address of Curre		301			10. Name and Address of New Registered		70	2110
u u			81	11 1	Name	10.			
	GINS, PATRICK E								
	N.E. 37TH STREET		8:	2 3	Street Addre	ess (P.O. Box Number is Not Acceptable)			
BOO	CA RATON FL 33431		83	-					
			~	٦					
			84	4 (City		85	Zip Ci	ode
				Ц.,		FI			
11. Pursuant to office or re	o the provisions of Sections 607.050 egistered agent, or both, in the State	J2 and 607.1508, Florida Statutes e of Florida. Such change was au	s, the abov Jihorized b	ve-n ov th	named corpo ne corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	ot chang: pointmen	ng its it as r	registered egistered
agent I ar	n familiar with, and accept the oblig	ations of, Section 607.0505, Flor	ida Statute	es.	ir as porano	5-10 Domina 5- and 5-10-10-10-10-10-10-10-10-10-10-10-10-10-	, p.		giotore
SIGNATURE .									
	Signature, typed or printed name of registered ag			gent e	signature required	d when reinstaling) DATE			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	∐ DELETE	1.1 TITLE		ļ		L. Char	nge	Addition
NAME	HIGGINS, PATRICK E		1.2 NAME	E					
STREET ADDRESS	401 N.E. 37TH STREET		1.3 STREE	ET AD	DRESS				
CITY-ST-ZIP	BOCA RATON FL 33431		1.4 CITY-		ZIP				
TITLE	D	DELETE	2.1 TITLE				L. Cha	nge	Addition
NAME	WITT, MARK		2.2 NAME						
STREET ADDRESS	3438 S.W. 24TH TERRACE		2.3 STREE	ET AD	DRESS				
CITY-ST-ZIP	MIAMI FL 33145		2. 4 CITY		ZIP	·····			
TITLE		☐ DELETE	3 1 TITLE				L Cha	age	Addition
name			3.2 NAME	•					
STREET ADDRESS			3.3 STREE	et ad	DRESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	3.4. CITY	- \$1-2	ZIP				
TITLE		☐ DELETE	4.1 TITLE		}		Char	n g e	Addition
NAME			4. 2 NAMI	E	ļ				
STREET ADDRESS			4.3 STREE	ET AD	ORESS				
CITY-ST-ZIP			4.4 CITY-	ST-Z	ZIP				
TITLE		DELETE	5.1 TITLE		[" "		Char	nge	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREE	ET ADI	ORESS				
CITY-ST-ZIP			5.4 CITY-	ST-Z	ZIP				
TITLE		☐ DELETE	6.1 TITLE				Char	nge	Addition
NAME :			6.2 NAME						
STREET ADDRESS			6.3 STREE		DRESS				
CITY-ST-ZIP			6.4 CiTY-						
14. I hereby c	ertify that the information supplied v	vith this filing does not qualify for	the exem	ptio	n stated in S	Section 119.07(3)(i), Florida Statutes. I further	ertify that	t the i	nformation
indicated a	on this annual report or supplement	at annual report is true and accur	irate and ti	hatı	my signature	e shall have the same legal effect as if made used by Chapter 607, Florida Statutes; and that	ındar oath	n that	lam an