2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 25, 2003 8:00 am
Secretary of State
04-25-2003 90231 004 ***150.00

DOCUMENT # P97000017708

1. Entity Name
DIGITAL SOUND AND AMUSEMENT INC.

Principal Place of Business	Mailing Address
1149 SW 27TH AVE. STE 305 MIAMI FL 33135	1149 SW 27TH AVE. STE 305 MIAMI FL 33135

11016547

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
11325 SW 32nd ST Suite, Apt. #, etc.	P.O. BOX 4539 Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33165 Country:	Zip: 33265 Country:

4. FEI Number 65-0730788 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ, JOSE L
11325 SW 32ND STREET
MIAMI FL 33165

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.

SIGNATURE Jose Luis Gonzalez President 04/24/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSD GONZALEZ, JOSE L 11325 SW 32ND ST. MIAMI FL 33165	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GONZALEZ, ALINA L 11325 SW 32ND ST. MIAMI FL 33165	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MORALES, MIGUEL SMITH BAY 13 ST THOMAS VI	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jose Luis Gonzalez 04/18/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

JOSE L. GONZALEZ

CR2E034 (9/01)