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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # 1. Corporation Name P97000021273 (2)

FILED Feb 18 1998 8:00am Secretary of State

BRANDON CITY STEREOS INC						
						A LEGANDON NA ERRA ERRA BONA BONA BONA BONA BONA BONA BONA BON
Principal Place of Business Mailing Address						d aboutdos alo soute about dout about dout about about about alone tide (1011) fondo (1111 filo)
901 W BRANDON BLVD 901 W BRANDON BLVD						
BRANDON FL 33511 BRANDON FL 33511						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						03/03/1997
2. Principal Place	e of Business	2a. Mailing Address	2a. Mailing Address			
21		26	26			4. FEI Number 65-0736363 Applied For Not Applicable
Suite, Apt. #, e	etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional
22		27 Oh (6 Oh)	City & State			Fee Required
City & State		— ´	28			B. Election Campaign Financing Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cor	intry		
24	25	29	30			8. This corporation owes or has paid the correlit year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre		[00]	1		10. Name and Address of New Registered Agent
I AI W	ANI, JAI S			81	Name	
	/ BRANDON BLVD			B2	Stroot Adv	Idress (P.O. Box Number is Not Acceptable)
	DON FL 33511				Oliebi Aui	ioness (r.o. box Number is Not Acceptable)
				83		
				84	City	■■ 85 Zip Code
					-	FL `
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab office or registered agent, or both, in the State of Florida. Such change was authorized 					named co	orporation submits this statement for the purpose of changing its registered
agent. I am f	amiliar with, and accept the oblin	gations of, Section 607.0505, F	lorida Stat	tutes	the corpon	rations board or directors. Thereby accept the appointment as registered
SIGNATURE X	yd hu					1 28798
	Ature, typod or printed name of registered as	gent and title if applicable. (NC ND DIRECTORS		d Ager	nt signature req	quired when reinstating) DATE
TITLE	/	LOCUETE	13. 1.1 Ti	T) £		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	PD - 10-0	/ At A L	1.2 N			J Change Land House
STREET ADDRESS	"Y DIMMIC ?"	LHLWHNI	1.3 STREET ADDRE		ADDRESS	
CITY-ST-ZIP	PD JI WAT S. 901 BRANDO Brandon, F	11 33211 W		ITY-ST		
TITLE	13 [(1) - (1) - (1)	DELETE	2.1 TI			☐ Change ☐ Addition
NAME			2.2 N/	2.2 NAME		
STREET ADDRESS			2.3 S		ADDRESS	·
CITY-ST-ZIP			2.40	ITY-SI	T-ZIP	
TITLE		☐ DELETE	3.1 TE	TLE		☐ Change ☐ Addition
NAME			32 N	4ME		
STREET ADDRESS			3.3 51	AEET /	address	
CITY-ST-ZIP	-	here		(TY-SI	T-ZIP	
TITLE		L] DELETE	4.1 Ti			☐ Change ☐ Addition
NAME			4. 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CI 5.1 TI	TY-ST	- ZIP	Change Addition
NAME		C) OLLLIE	5.1 II 5.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP						
TITLE	_	☐ DELETE	5.4 CI 6.1 TII		- 617	☐ Change ☐ Addition
NAME		<u> </u>	6.2 NA			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			6.4 Cf			

14. 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 annual report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.