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FILED
Jul 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000054828 (3)

1. Corporation Name

SCHUNK AUDIO ENGINEERING, INC.

Principal Place of Business

Mailing Address

1420 SOUTHEAST 3RD STREET
CAPE CORAL FL 32990

1420 SOUTHEAST 3RD STREET
CAPE CORAL FL 32990

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/23/1997

4. FEI Number

65-0762436

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

Yes No

2. Principal Place of Business

2a. Mailing Address

21 1204 SE 15th STREET

26 1204 SE 15th STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 CAPE CORAL, FL

28 CAPE CORAL, FL

Zip

Country

Zip

Country

24 33990

25 U.S.A.

29 33990

30 U.S.A.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

81 Name

MARINA R. KENSINGER

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

1204 SE 15th STREET

83

84 City

CAPE CORAL

FL

85 Zip Code

33990

11. Pursuant to the provisions of Sections 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

Marina Kensinger

MARINA KENSINGER

06/19/98

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD
NAME SCHUNK, MARTIN
STREET ADDRESS 1420 SOUTHEAST 3RD STREET
CITY-ST-ZIP CAPE CORAL FL 32990

1.1 TITLE PTD
1.2 NAME SCHUNK MARTIN
1.3 STREET ADDRESS 9810 LEEWARD CT
1.4 CITY-ST-ZIP FT. MYERS, FL 33919

TITLE SVD
NAME SCHUNK, FRITZ
STREET ADDRESS 1420 SOUTHEAST 3RD STREET
CITY-ST-ZIP CAPE CORAL FL 32990

2.1 TITLE SVD
2.2 NAME SCHUNK FRITZ
2.3 STREET ADDRESS 9810 LEEWARD CT
2.4 CITY-ST-ZIP FT. MYERS, FL 33919

TITLE D
NAME ADOMEIT, RAINER G
STREET ADDRESS 1420 SOUTHEAST 3RD STREET
CITY-ST-ZIP CAPE CORAL FL 32990

3.1 TITLE DIS
3.2 NAME SCHUNK, STEFFEN
3.3 STREET ADDRESS 9810 LEEWARD CT
3.4 CITY-ST-ZIP FT. MYERS, FL 33919

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 supplement to 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.

CR2E034 (10/97)