

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
 Aug 12 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # P97000072954 (5)
 1. Corporation Name
 GUZCOM ENTERPRISES, INC.



Principal Place of Business Mailing Address
 4403 VINELAND ROAD 4403 VINELAND ROAD
 SUITE B-3 SUITE B-3
 ORLANDO FL 32811 ORLANDO FL 32811

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

3. Date Incorporated or Qualified
 08/21/1997
 4. FEI Number Applied For
 59-3470910 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

9. Name and Address of Current Registered Agent
 JOHNSON, WILLIAM A
 6767 N. WICKHAM ROAD
 SUITE 400F
 MELBOURNE FL 32940

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

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 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	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUZZI, JOSEPH S	1.2 NAME	
STREET ADDRESS	10112 STANTON COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32836	1.4 CITY-ST-ZIP	
TITLE	PST	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUZZI, JOSEPH S	2.2 NAME	
STREET ADDRESS	10112 STANTON COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32836	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 ***150.00

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.

SIGNATURE: SIGNATURE REQUIRED 7/30/98 (407)649-10444

CR2E034 (5/98)



TAI AUDIO

Handwritten initials

July 29, 1998

FLORIDA DEPT. OF STATE
REF: 1998 PROFIT CORP. ANNUAL REPORT

To Whom it May Concern,

TAI Audio did not receive the 1st Notice for payment of annual corporate taxes, only the 2nd notice. I called the Public Inquiry Department Division of Corporations in Tallahassee and spoke to Kathy (would not give me her last name). It was explained to me to write this letter and pay the original amount, \$150.00, due.

If you have any further questions or comments, please do not hesitate to call me.

Thank You

Catherine Jones,
Office Manager

RENTAL • SALES • SERVICE

4403 VINELAND ROAD • SUITE B-3 • ORLANDO, FL 32811 • PHONE 407-649-6444 • FAX 407-648-1352
TOLL FREE 800-486-6444 • E MAIL: TAIAUDIO@AOL.COM