FILED
Sep 11, 2002 8:00 am
Secretary of State
09-11-2002 90060 041 ***150.00

2002 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000102513

1. Entity Name
SOUND & TOUCH INC.

979060

DO NOT WRITE IN THIS SPACE

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1205 BOREAS DR	1205 BOREAS DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO FL	City & State: ORLANDO FL
Zip: 32822 / Country: ORANGE	Zip: 32822 / Country: ORANGE

4. FEI Number: 59-3481120 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Name: HOFFMAN, ANN
Street Address (P.O. Box Number is Not Acceptable): 1205 BOREAS DR
City: ORLANDO FL Zip Code: 32822

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 ELSIE ANN HOFFMAN *Elsie Ann Hoffman* 5-7-02
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) ☒

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST HOFFMAN, ANN 1205 BOREAS DR ORLANDO FL 32822	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
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CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Elsie Ann Hoffman* ELSIE ANN HOFFMAN 4-8-02 4072078903
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Attachment

9.5.02

#P97000102513

To Whom It May Concern,

This payment is the second check sent for $150.00. I am researching the 1st check. I am sorry for the delay, but I appreciate your assistance.

Sincerely

E. Ann Hoffman

Sound & Touch, Inc