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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90031 017 ***150.00

DOCUMENT # P9800005937. THE AUDIO STORE, INC.						
Deineinal Dine	o of Dunings	Mailing Addross				- *
Principal Place of Business Mailing Address						
1318 N. MONROE STREET SUITE E 1318 N. MONROE STREET SUITE E						
TALLAHASSEE FL 32303 TALLAHASSEE FL 32303						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
					_	01/20/1998 4. FEI Number Applied For
Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For Not Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			_ \$8.75 Additional	
22 27		— · ·	5516,746.11,516.			5. Certificate of Status Desired Fee Required
City & State		City & State			6. Election Campaign Financing S5.00 May Be	
23	28					Trust Fund Contribution Added to Fees
Zip	Country Zip Country			ntry		8. This corporation owes the current year Intangible
24	25				<u> </u>	Personal Property Tax. Yes No
	9. Name and Address of Curren	t Registered Agent		81	Name	10. Name and Address of New Registered Agent
PATTERSON, TODD A						ss (P.O. Box Number is Not Acceptable)
1318 N. MONROE STREET						
SUITE E				83		
TALLAHASSEE FL 32303				84 City FL 85 Zip Code		
		0 1 007 4500 51-11-01-11-				
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 a	m familiar with, and accept the obliga	tions of, Section 607.0505, Flori	da Statt	iles.		
SIGNATURE	Signature, typed or printed name of registered agei	nt and title if applicable (NOTE: #	Registered	Agent s	signature required v	when reinstating) DATE
12.			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PSTD	☐ DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	PATTERSON, TODD A		1.2 NAME			
STREET ADDRESS	1318 N. MONROE STREET		1.3 STREET AD		ODRESS	
CITY-ST-ZIP	TALLAHASSEE FL 32303		1.4 CITY-ST-		ZIP	
TITLE	V	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	PHILLIPS, JOAN		2.2 NAME			
STREET ADDRESS	10.10.111.1110-1.1110-1			DDRESS		
City-St-Zip	TALLAHASSEE FL 32303		2.4 CITY-S		ZIP	☐ Change ☐ Addition
TITLE		☐ DELETE	31 TITLE		Ì	☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS					DDRESS	
CITY-ST-ZIP		DELETE	3.4. CI 4.1 TIT	TY-ST-	. 215	☐ Change ☐ Addition
TITLE NAME	4.		4.2 N			
STREET ADDRESS					NODRESS .	
			1			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST 5.1 TITLE			☐ Change ☐ Addition
NAME		_	5.2 NAME			
STREET ADDRESS			5.3 ST	REETA	DDRESS	
CITY-ST-ZIP			5.4 CF	TY-ST-	ZIP	
TITLE	: .	☐ DELETE	6.1 TPT	LΕ		☐ Change ☐ Addition
NAME			6.2 NA	ME		{
STREET ADDRESS	-		6.3 ST	REETA	DORESS	ţ
CITY OF TID			6.4 CD	Y-ST-	ZIP İ	

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, with all other like empowered.

SIGNATURE: