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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000021166

1. Corporation Name

DATASOUND, INC.

Principal Place of Business

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE

PO BOX 1553 18111 CLEAR LAKE DR **LUTZ FL 33549** 111TZ Ft 33548 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/04/1998 4, FEI Number Applied For Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State City & State \$5.00₅May:Be.= 6. Election Campaign Financing **Trust Fund Contribution** Added to Fees 28 23 Zip Country Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes Mo 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 SMITH, DOUGLAS A 82 Street Address (P.O. Box Number is Not Acceptable) 18111 CLEAR LAKE DR **LUTZ FL 33549** 83 Zip Code 84 City 85 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition DELETE 1.1 TITLE ☐ Change TITLE SMITH, DOUGLAS A 1.2 NAME NAME 18111 CLEAR LAKE DR 1.3 STREET ADDRESS STREET ADDRESS **LUTZ FL 33549** 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADORESS STREET ADORESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition □ DELETE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME

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: 🗘

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

☐ DELETE

☐ DELETE

CR2E034 (11/98

[] Change

Addition |

Addition

FILED Mar 08, 1999 8:00 am

Secretary of State

03-08-1999 90081 008 ***150.00