2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2004
Secretary of State

DOCUMENT# P98000072132

Entity Name: CUSTOM KAR SOUNDS OF MIAMI, INC.

Current Principal Place of Business:

700 NORTHEAST 167TH STREET
NORTH MIAMI BEACH, FL 33162

New Principal Place of Business:

Current Mailing Address:

700 NORTHEAST 167TH STREET
NORTH MIAMI BEACH, FL 33162

New Mailing Address:

FEI Number: 65-0858886 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LORENZ, KLAUS
700 NE 167 ST
N MIAMI, FL 33162

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: TUESTA, RAFAEL A
Address: 700 NORTHEAST 167TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: PD ( ) Delete
Name: TUESTA, RAFAEL A
Address: 700 NORTHEAST 167TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VSTD ( ) Delete
Name: LORENZ, KLAUS
Address: 700 NORTHEAST 167TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

Title: VSTD ( ) Delete
Name: LORENZ, KLAUS
Address: 700 NORTHEAST 167TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAEL TUEASTA PD 01/22/2004
Electronic Signature of Signing Officer or Director Date