

FILED
Aug 15, 2003 8:00 am
Secretary of State

DOCUMENT # P99000043004

Mailing Address
5423 NW 54 DRIVE
COCONUT CREEK, FL 33073

3. Mailing Address
6778 N.W. 1 STREET
Suite, Apt. # etc

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0943008**

Country
BROWARD

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name JENNY R. KLOCKZIEM
Street Address (P.O. Box Number is Not Acceptable) 6778 N.W. 1 street
City MARGATE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when installing)

DATE 06/12/03

FILE NOW!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Amended LBR is \$61.25
Make Check Payable to Florida Department of State


9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

the receiver or trustee empowered to execute this report as required
attachment with an address, with all other like empowered.



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/12/03 (154) 974 8800
Daytime Phone #

CR2E034 (10/02)

attachment

90150548

#P99000043004

Janice B. Holland

Certified Public Accountant

P.O. Box 521105

Longwood, FL 32752-1105

(407)389-2213 Fax(407)389-2217

August 8, 2003

UBR - Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Sounds Fantastic Productions, Inc.
P99000043004

Dear Representative:

Enclosed is an updated 2003 UBR for the above-referenced corporation.

The new stockholder purchased all of the outstanding shares during the latter part 2002. Since it is an S Corporation for federal purposes and requires allocation of profits between the two stockholders, it was agreed that the prior stockholder's accountant would complete the year-end filings for the corporation and effect a smooth transition.

The new stockholder was not aware of the required UBR filing nor did the prior accountant or selling stockholder alert him to the necessity. I recently spoke with my client and in the process of trying to complete his 2002 income tax return, discovered this information.

We, therefore, respectfully request that the state accept the \$150 filing fee and waive any late charges. The new stockholder did not receive the form since it went to the company's old address of record and relied upon the seller's stockholder to effect a smooth transition, as agreed.

Thank you,

Jan B. Holland
Janice B. Holland, CPA

Enclosures