## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED **ANNUAL REPORT** Jan 16, 2008 08:00 AN **DOCUMENT # P99000051998 Secretary of State** 1. Entity Name SOUNDGUY, INC. Principal Place of Business: A Secretary Control of Mailing Address 4742 KERLE ST. 4742 KERLE ST. on this JACKSONVILLE, FL 32205-4904 JACKSONVILLE, FL 32205-4904 01132008 CR2E034 (11/05) No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3580090 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCGUIRE, ALFRED DO NOT WRITE 4742 KERLE ST. JACKSONVILLE, FL 32205-4904 IN THIS SPACE 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 reinstating) 9. Election Campaign Financing \$5.00 May Be 000000785246 FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 01/16/08-80088-012 150.00 10. OFFICERS AND DIRECTORS TITLE NAME MCGUIRE, ALFRED 4742 KERLE ST., STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 322054904 TITLE BARNETT, HUNTER NAME STREET ADDRESS 4742 KERLE ST. CITY-ST-ZIP JACKSONVILLE, FL 322054904 DTLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

STREET ADDRESS CITY-ST-ZIP

SCONATURE AND TYPED OF PRINTED MAI

OF SIGNING OFFICER OR DIRECTOR

PRESIDENT

1-13.07

407-895:0148

Daytime Phone #