

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90113 027 ***150.00

DOCUMENT # S00638

1. Corporation Name

POWER PLUS SOUND & PROTECTION, INC.

Principal Place of Business

14760 S.W. 56TH STREET
MIAMI FL 33185

Mailing Address

14760 S.W. 56TH STREET
MIAMI FL 33185

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/14/1990

4. FEI Number

65-0219428

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 8198 W. FLAGLER ST.

2a. Mailing Address

26 8198 W. FLAGLER ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 MIAMI FL

City & State

28 MIAMI FL

Zip

24 33144

Country

25 USA

Zip

29 33144

Country

30 USA

9. Name and Address of Current Registered Agent

GONZALEZ, ZAIDA
12441 SW 99 STREET
MIAMI FL 33186

10. Name and Address of New Registered Agent

81 Name

JULIAN D. GONZALEZ

82 Street Address (P.O. Box Number is Not Acceptable)

8198 W. FLAGLER ST.

83

84 City

MIAMI

FL

85 Zip Code

33144

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] President

1/5/99

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME GONZALEZ, ZAIDA
STREET ADDRESS 12441 SW 99 ST.
CITY-ST-ZIP MIAMI FL ☒ DELETE

TITLE DV
NAME GONZALEZ, JULIAN D
STREET ADDRESS 12441 SW 99 ST.
CITY-ST-ZIP MIAMI FL ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE P
2.2 NAME JULIAN D GONZALEZ
2.3 STREET ADDRESS 8198 W. FLAGLER ST.
2.4 CITY-ST-ZIP MIAMI, FLA. 33144 ☒ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

[Signature] JULIAN D. GONZALEZ

1/5/99

305-262-7100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)