## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# S07742

FILED Jan 19, 2005 Secretary of State

Entity Name: TRUE DIMENSIONAL SOUND, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
14075 SW 72ND CT MIAMI, FL 33158 US					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
PO BOX 3773 SARASOTA, FL 34230 US					
FEI Number: 65-0245605		FEI Number Applied For ( ) FEI	Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
KNECHT, STEPHEN M., ESQ. 14075 S.W. 72ND COURT MIAMI, FL 33158 US					
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: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	VASD ()E ARTURO, GARCI 4443 SW 11TH S MIAMI, FL 33134	ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PD () E KNECHT, STEPH 14075 SW 72ND MIAMI, FL 33158	СТ	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPAS () E GALEN, CLARK 6345 RAVENWO SARASOTA, FL		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FERRARO, JAME	BLVD STE 3800	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPAS () [ KNECHT, CHRIS 7960 SW 142ND MIAMI, FL 33158	ST.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VPAS () E GORDON, THOM 16101 SW 76TH MIAMI, FL 33157	AVE.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
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: STEPHEN M. KNECHT PD 01/19/2005 Date