FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT. FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 **DOCUMENT #** (7) 1. Corporation Name SOUNDTRONICS, INC. Mailing Address Principal Place of Business 13651 W DIXIE HWY 13651 W DIXIE HWY N MIAMI FL 33161 N MIAMI FL 33161 3a. Date of Last Report 3. Date Incorporated or Qualified 01/29/1991 06/05/1995 Applied For 4 FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0296074 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \Box Fee Required 27 22 6. Election Campaign Financing \$5.00 May Be City & State City & State \Box Trust Fund Contribution Added to Fees 23 8. This corporation has liability for intangible tax under s 199.032. Country Zio Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TABARESTANI, HOSSEN D. 82 13651 W DIXIE HWY 83 N MIAMI FL 16978-4528 Zip Code 84 City 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. Ta bulestand Mossein ()A"E SIGNATURE: NotEl Registered Agent signal ce re, typed or purted have of registered ago, take the traps ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Change Addition DELETE 1.1 TOTALE TiTLE 1.2 NAME TABARESTANI, HOSSEN D. NAME 13651 W DIXIE HWY 1.3 STREET ACCORESS STREET ADDRESS N MIAMI FL 14 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1166 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CiTY - ST - Z P CITY-ST-ZIP Addition Change DELETE 3 1 HILE . TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CiTY - \$1 - ZiP CITY-ST-2IP Change Addition ☐ DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIF CITY-ST-ZIP DELETE Change Addition 5 1 TillE TITLE 5.2 NAME NAME 300001796863 5.3 STREET-ADDRESS STREET ADDRESS -04/26/96--01094--024 5.4 CITY ST-ZIP CITY - S1 - ZIP ***200.00 Change DELETE 6 1 THE TITLE 6.2 NAME NAME 6.2 STREET ADDRESS STREET ADDRESS 6.4 City -ST 7IP 14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify 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 a yellachanger with an address.

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Tabarastan 2-12-96

CR2E034 (12/95)