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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

(9)

DOCUMENT # MIDARAL SOUND SYSTEM CORP

FILED May 13 1998 8:00am Secretary of State

L. MIID	ADAL GOUND STOTLING	OIII ·						
Principal Plac	e of Business	Mailing Ad	idross				T SERVINGIA COLI BILLIL BOLOL LITOLO LITILI DIGILI GLOSI	
2205 SW 671	THA VE	2205 SW	67TH AVE					
#1		#1					DO NOT WORTE IN THE COACE	
MIAMI FL 33	155		MIAMIO FL 33155				DO NOT WRITE IN THIS SPACE	
US		US					3. Date Incorporated or Qualified 04/24/1991	
6 Chinainal C	No. a. of Division on	2a. Mailing	Address					
	Place of Business	<u>├</u> ─┐ `	J Address				4. FEI Number Applied For Not Applied For	
Sulte, Apt.	# etc		Suite, Apt. #, etc.				£0.75 A 144	
22	#, GC.		27				5. Certificate of Status Desired Fee Required	
City & Stat	le .		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28					Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Cour	ntry	-	8. This corporation owes or has paid the current year Intangible	
24	25	F-3			Personal Property Tax due June 30. X Yes No			
e-7	9. Name and Address of Curr		gent	11			10. Name and Address of New Registered Agent	
M	RABAL, ALFREDO				81	Name		
	105 SW 67TH AVE					Character	Addison (D.O. Box Number in Not Aggestable)	
#1				l	82	Street /	Address (P.O. Box Number is Not Acceptable)	
	MI FL 33155			ŀ	83			
, ITTL	MINI 1 E 33 133							
-					84	City	FL 85 Zip Code	
agent. I a	Signature, typod or proted name of registered	agent and the it applicat		E Registered			poration's board of directors. I hereby accept the appointment as registered	
12.	OFFICERS /	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		L_ DELETE	1.1 TIT	ίΕ	İ	DIP Change Addition	
NAME	MIRABAL, ALFREDO			1.2 NA	NAME 🙌		Mirabal, Alfredo 2205 s.w. 67th Ave.	
STREET ADDRESS								
CHTY-ST-ZIP	MIAMI FL			1.4 CI		T - ZIP	Hiami, FL 33155	
TITLE			DELETE	2.1 TITLE			☐ Change ☐ Addition	
NAME				2.2 NA	ME			
STREET ADDRESS				2.3 ST	REET	ADDRESS		
CITY-ST-ZIP				2. 4 CI		T-ZIP		
TITLE			□ DELETE	3.1 TIT			Change Addition	
NAME				3.2 NA				
STREET ADDRESS				3.3 ST	REE1	ADDRESS		
CITY-ST-ZIP				3.4. CI	TY-S	31 - ZIP		
TITLE			DELETE	4.1 7(1	LE		Change Addition	
NAME				4. 2 N/	AME			
STREET ADDRESS				4.3 ST	REET	address		
CITY-ST-ZIP				4.4 C()		T - ZIP		
TITLE			DELETE	5.1 117	LE		Change Addition	
NAME				5 2 NA	ME		300002524743	
STREET ADDRESS				5.3 ST	REET	ADDRESS	3 0 000252 474 3 -05/15/9801009021	
CITY-ST-ZIP				5.4 CI	IY-S	T - ZIP	***158.7S	
TITLE			DELETE	6.1 717	LE		Change Addition	
NAME				62 NA	ME		11.	
STREET ADDRESS				63 ST	AEET	ADDRESS	\V \L'	
CITY-ST-ZiP				64 CF	TY-S	1 - 71P	1 *)	

14. Thereby 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.