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

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # \$64581



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90227 006 ***150.00

AUDIOM	ATIC CORPORATION				
Principal Place of Business Mailing Address					
3000 NE 12TH TERRACE 5T. LAUDERDALE FL 33334 FT. LAUDERDALE FL 33334					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 07/08/1991
2. Principal PI	lace of Business	2a. Mailing Address			4. FEI Number Applied For 65-0270265 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required
City & State	e	City & State	·		6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country 25	Zip 3	Count	у	8. This corporation owes the current year Intangible Personal Property Tax.
***	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registered Agent
CONINGSBY, TODD DAREN 3000 NE 12TH TERRACE FT. LAUDERDALE FL 33334			8	2 Street	Address (P.O. Box Number is Not Acceptable)
				4 City	FL 85 Zip Code
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was auti	horized t	y the corp	corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE: R	egistered Aç	ent signature	required when reinstating) DATE
12. OFFICERS AND DIRECTORS 13			13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	CONINGSBY, A. ROBERT III		1.2 NAMI	i .	
		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY	ST-ZIP	

☐ Addition ☐ DELETE 21 TITLE Change TITLE CONINGSBY, TODD DAREN 22 NAME NAME 3000 NE 12TH TERRACE 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change DELETE 3.1 TITLE TITLE CONINGSBY, GREGG OLIVER 3.2 NAME NAME 3000 NE 12TH TERRACE 3.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE CONINGSBY, RUSSELL WARD 4. 2 NAME NAME 3000 NE 12TH TERRACE 4.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 51 TITLE TITLE HALEY, KRISTINA C. 52 NAME NAME 5.3 STREET ADDRESS 3000 NE 12TH TERRACE STREET ADDRES 5.4 CITY-ST-ZIP FT. LAUDERDALE FL CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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:



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