

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUN 30 AM 9:46

DOCUMENT # V34231 (3)

1. Corporation Name

AUDIO ELITE, INC.

Principal Place of Business

**1800 SE 17TH STREET
SUITE 300
FT LAUDERDALE FL 33316**

Mailing Address

**1800 SE 17TH STREET
SUITE 300
FT LAUDERDALE FL 33316**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/06/1992	3a. Date of Last Report 05/01/1994
4. Fil Number 65-0335456	Applied For Last Application
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. ☐	\$5.00 May Be Added to Fees
7. This corporation has adopted the alternative fee schedule 1003.013 Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business

State, Apt. #, etc.

City & State

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2a. Mailing Address

State, Apt. #, etc.

City & State

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9. Name and Address of Current Registered Agent

**HATCH, IRA C
1800 SE 17TH STREET
SUITE 300
FT LAUDERDALE FL 33316**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. (Leave blank - P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent Acceptance)

(Signature of Registered Agent or Registered Agent Acceptance)

DATE

12. OFFICERS AND DIRECTORS

12a. TITLE	P
12b. NAME	BEESING, ROBERT
12c. STREET ADDRESS	14548 SW 124 PL
12d. CITY, ST, ZIP	MIAMI FL
12e. TITLE	VP
12f. NAME	BEESING, CHARLES
12g. STREET ADDRESS	5530 SW 109TH AVE
12h. CITY, ST, ZIP	FT LAUDERDALE FL
12i. TITLE	
12j. NAME	
12k. STREET ADDRESS	
12l. CITY, ST, ZIP	
12m. TITLE	
12n. NAME	
12o. STREET ADDRESS	
12p. CITY, ST, ZIP	
12q. TITLE	
12r. NAME	
12s. STREET ADDRESS	
12t. CITY, ST, ZIP	

13. TITLE	☐ Change ☐ Addition
13a. NAME	
13b. STREET ADDRESS	
13c. CITY, ST, ZIP	
13d. TITLE	☐ Change ☐ Addition
13e. NAME	
13f. STREET ADDRESS	
13g. CITY, ST, ZIP	
13h. TITLE	☐ Change ☐ Addition
13i. NAME	
13j. STREET ADDRESS	
13k. CITY, ST, ZIP	
13l. TITLE	☐ Change ☐ Addition
13m. NAME	
13n. STREET ADDRESS	
13o. CITY, ST, ZIP	
13p. TITLE	☐ Change ☐ Addition
13q. NAME	
13r. STREET ADDRESS	
13s. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(6)(b), 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. I am an officer or director of the corporation or the receiver or liquidator empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this filing or on an attachment to this filing.

SIGNATURE:

Charles Beesing
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Charles Beesing

6/26/95

305-378-6690