

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

FILED  
Apr 29 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # V51907 (6)  
1. Corporation Name  
TARA CAY SOUND, INC.



Principal Place of Business  
8351 BLIND PASS RD  
ST PETERSBURG BEACH FL 33706

Mailing Address  
8351 BLIND PASS RD  
ST PETERSBURG BEACH FL 33706

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/17/1992	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3133977	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
DOUGLASS, ROBERT A. 8351 BLIND PASS RD ST PETERSBURG BEACH FL 33706		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, JACK	1.2 NAME	
STREET ADDRESS	401-9 ST E 30432 VIA ANDALUSIA	1.3 STREET ADDRESS	
CITY-ST-ZIP	TIERRA VERDE FL SAN JUAN CAPISTRANO, CA 92675	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> DELETE	2.2 NAME	
NAME	WADSWORTH, LON C.	2.3 STREET ADDRESS	
STREET ADDRESS	8351 BLIND PASS RD	2.4 CITY-ST-ZIP	
CITY-ST-ZIP	ST PETERSBURG BCH FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> DELETE	3.2 NAME	
NAME	DOUGLASS, ROBERT A.	3.3 STREET ADDRESS	
STREET ADDRESS	8351 BLIND PASS RD	3.4 CITY-ST-ZIP	
CITY-ST-ZIP	ST PETERSBURG BCH FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	4.2 NAME	
NAME		4.3 STREET ADDRESS	
STREET ADDRESS		4.4 CITY-ST-ZIP	
CITY-ST-ZIP		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	5.2 NAME	
NAME		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	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.

SIGNATURE:

*[Signature]*

4/22/98

813-367-5614

CR2E034 (10/97)