| Current Principal Place of Business: |  |  |  |  |
|--------------------------------------|--|--|--|--|
| 2271A PALM BEACH LAKES BOULEVARD     |  |  |  |  |
| WEST PALM BEACH, FL 33409            |  |  |  |  |

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## **Current Mailing Address:**

DOCUMENT# G64806

2271A PALM BEACH LAKES BOULEVARD WEST PALM BEACH. FL 33409 US

Entity Name: AUDIO ADVISORS, INC.

# FEI Number: 59-2326158

## Name and Address of Current Registered Agent:

PARRISH, STEVEN ESQ. 330 CLEMATIS STREET SUITE 207 WEST PALM BEACH, FL 33401 US

FILED Jan 26, 2022 Secretary of State 5842083010CC

Certificate of Status Desired: Yes

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE:

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

| Title           | P                        | Title           | VP                     |
|-----------------|--------------------------|-----------------|------------------------|
| Name            | HOOVER, JEFFREY          | Name            | WEINSTOCK, WAYNE       |
| Address         | 509 MARGINAL RD          | Address         | 7955 LANDO AVENUE      |
| City-State-Zip: | WEST PALM BEACH FL 33411 | City-State-Zip: | BOYNTON BEACH FL 33437 |
| Title           | S/T                      |                 |                        |
| Name            | HOOVER, VALERIE          |                 |                        |
| Address         | 509 MARGINAL RD          |                 |                        |
| City-State-Zip: | WEST PALM BEACH FL 33411 |                 |                        |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: VALERIE HOOVER

S/T

Date

Electronic Signature of Signing Officer/Director Detail