

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 17, 2009  
Secretary of State**

DOCUMENT# 665782

Entity Name: AUDIO VISUAL INNOVATIONS, INC.

**Current Principal Place of Business:**

6301 BENJAMIN RD. STE 101  
TAMPA, FL 33634

**New Principal Place of Business:**

**Current Mailing Address:**

6301 BENJAMIN RD. STE 101  
TAMPA, FL 33634

**New Mailing Address:**

FEI Number: 59-1958935      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SCHAFFEL, MARTIN  
Address: 6301 BENJAMIN RD, SU-101  
City-St-Zip: TAMPA, FL 33634

Title: S ( ) Delete  
Name: SCHAFFEL, MARTIN  
Address: 6301 BENJAMIN RD SU-101  
City-St-Zip: TAMPA, FL 33634

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: CEO (X) Change ( ) Addition  
Name: JOHN ZETTEL  
Address: 6301 BENJAMIN RD, SU-101  
City-St-Zip: TAMPA, FL 33634

Title: CFO (X) Change ( ) Addition  
Name: YANCICH, NICHOLAS  
Address: 6301 BENJAMIN RD SU-101  
City-St-Zip: TAMPA, FL 33634

Title: COO ( ) Change (X) Addition  
Name: LANEVE, DON  
Address: 6301 BENJAMIN RD SUITE 101  
City-St-Zip: TAMPA, FL 33634

Title: P ( ) Change (X) Addition  
Name: SCANLON, STEPHENIE  
Address: 6301 BENJAMIN ROAD SUITE 101  
City-St-Zip: TAMPA, FL 33634

Title: VP ( ) Change (X) Addition  
Name: BENJAMIN, STEVE  
Address: 6301 BENJAMIN ROAD #101  
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STEVE BENJAMIN

VP

08/17/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date