2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000000144

1. Entity Name

INTERNATIONAL AUDIO VISUAL INC.

FILED
Jan 19, 2000 8:00 am
Secretary of State
01-19-2000 90196 038 ***158.75

Principal Place of Business	Mailing Address
2621 N. ATLANTIC BLVD. FT. LAUDERDALE FL 33308	2621 N. ATLANTIC BLVD. FT. LAUDERDALE FL 33309-5938

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3215 NW 10th Terrace	3215 NW 10th Terrace
Suite, Apt. #, etc.: 206	Suite, Apt. #, etc.: 206
City & State: Fort Lauderdale, FL	City & State: Fort Lauderdale, FL
Zip: 33309 Country: USA	Zip: 33309 Country: USA

4. FEI Number 65-0797730 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GILBERT, WADE
2621 N. ATLANTIC BLVD.
FT. LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 [signature] 1-7-00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2000 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KLAAS, JEFF 2621 N. ATLANTIC BLVD. FT. LAUDERDALE FL 33308	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GILBERT, WADE 2621 N. ATLANTIC BLVD. FT. LAUDERDALE FL 33308	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (9/99)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Wade Gilbert 1-7-00 954-630-9797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #