

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L14421

FILED
Mar 05, 2007
Secretary of State

Entity Name: SOUTH FLORIDA VIDEO PRODUCTIONS, INC.

Current Principal Place of Business:

C/O KRIS MICHAEL LAHAM
1990 N.E. 195 DRIVE
N. MIAMI BCH, FL 33179

New Principal Place of Business:

Current Mailing Address:

C/O KRIS MICHAEL LAHAM
1990 N.E. 195 DRIVE
N. MIAMI BCH, FL 33179

New Mailing Address:

FEI Number: 65-0157439 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAHAM, KRIS MICHAEL
1990 N.E. 195 DRIVE
N MIAMI BCH, FL 33179 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LAHAM, KRIS MICHAEL,
Address: 1990 N.E. 195 DRIVE
City-St-Zip: N. MIAMI BCH, FL 33179

Title: DTS () Delete
Name: LAHAM, ANDREA JOY
Address: 1990 N.E. 195 DRIVE
City-St-Zip: N. MIAMI BCH, FL 33179

Title: D () Delete
Name: SISKIND, ROBERTA LYN, NE
Address: 1990 NE 195 DR.
City-St-Zip: NO. MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: SISKIND, ROBERTA LYN, NE
Address: 1990 NE 195 DR.
City-St-Zip: N. MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREA J. LAHAM

DTS

03/05/2007

Electronic Signature of Signing Officer or Director

_____ Date