

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L14421

**FILED**  
**Feb 21, 2008**  
**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: N. MIAMI BEACH, FL 33179

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

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

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

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

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: ANDREA JOY LAHAM

DTS

02/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date