

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100481

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: HB VIDEO, INC.

## Current Principal Place of Business:

8445 BOARDWALK TRAIL DR., APT. 811D  
TEMPLE TERRACE, FL 33637

## New Principal Place of Business:

2028 E. BEARSS AVE  
1116  
TAMPA, FL 33613

## Current Mailing Address:

8445 BOARDWALK TRAIL DR., APT. 811D  
TEMPLE TERRACE, FL 33637

## New Mailing Address:

9481 HIGHLAND OAK DRIVE  
UNIT 1610  
TAMPA, FL 33647

FEI Number: 20-3198405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BENT, NEDDROY  
4845 BOARDWALK TRAIL DR., APT. 811D  
TEMPLE TERRACE, FL 33637 US

## Name and Address of New Registered Agent:

BENT, NEDDROY E  
2028 E. BEARSS AVE  
1116  
TAMPA, FL 33613 US

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: NEDDROY EUGENE BENT

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BENT, NEDDROY  
Address: 8445 BOARDWALK TRAIL DR., APT 811D  
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: VD ( ) Delete  
Name: RODDY, WAYNE  
Address: 11616 COLONY LAKE DR  
City-St-Zip: TAMPA, FL 33635

Title: D ( ) Delete  
Name: ROZIER, ANTHONY  
Address: P.O. BOX 616241  
City-St-Zip: ORLANDO, FL 32861

Title: D (X) Delete  
Name: MCNEIL, ANWAR  
Address: 19416 VIA DEL MOR APT 302  
City-St-Zip: TAMPA, FL 33647

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: BENT, NEDDROY  
Address: 2028 E. BEARSS AVE. APT 1116  
City-St-Zip: TAMPA, FL 33613

Title: VD (X) Change ( ) Addition  
Name: MCNEIL, ANWAR  
Address: 9481 HIGHLAND OAK DRIVE UNIT 1610  
City-St-Zip: TAMPA, FL 33647

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: NEDDROY EUGENE BENT

PD

04/30/2007

Electronic Signature of Signing Officer or Director

Date