

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000016501

FILED
Jan 20, 2009
Secretary of State

Entity Name: MASTER AUDIO/CAMERAS CORP

Current Principal Place of Business:

16320 SOUTH POST ROAD
104
WESTON, FL 33331

New Principal Place of Business:

Current Mailing Address:

16320 SOUTH POST ROAD
104
WESTON, FL 33331

New Mailing Address:

P.O. BOX 327796
FORT LAUDERDALE, FL 33332

FEI Number: 20-8299266

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PUCHE, LUIS SR
16320 SOUTH POST RD
104
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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PUCHE, LUIS SR.
Address: 16320 SOUTH POST ROAD APT 104
City-St-Zip: WESTON, FL 33331

Title: VP () Delete
Name: RONDON, ADRIANA
Address: 16320 SOUTH POST ROAD APT 104
City-St-Zip: WESTON, FL 33331

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: LUIS PUCHE

P

01/20/2009

Electronic Signature of Signing Officer or Director

Date