

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 497677

FILED  
Jan 25, 2007  
Secretary of State

Entity Name: TV ANTENNA SYSTEMS, INC.

## Current Principal Place of Business:

16071 SW 254 STREET  
HOMESTEAD, FL 33031 US

## New Principal Place of Business:

## Current Mailing Address:

16071 SW 254 STREET  
HOMESTEAD, FL 33031 US

## New Mailing Address:

FEI Number: 59-1650598      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LOWRY, ROBERT  
16071 S.W. 254 STREET  
HOMESTEAD, FL US

## Name and Address of New Registered Agent:

LOWRY, ROBERT  
16071 S.W. 254 STREET  
HOMESTEAD, FL 33031 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: \_\_\_\_\_

01/25/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution (X).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LOWRY, ROBERT,  
Address: 16071 SW. 254 ST.  
City-St-Zip: HOMESTEAD, FL 33031

Title: STD ( ) Delete  
Name: LOWRY, LINDA H,  
Address: 16071 S.W. 254 ST.  
City-St-Zip: HOMESTEAD, FL 33031

Title: V ( ) Delete  
Name: LOWRY, RYAN M  
Address: 20437 SW 327 ST  
City-St-Zip: HOMESTEAD, FL 33030

## 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 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: ROBERT LOWRY

P

01/25/2007

Electronic Signature of Signing Officer or Director

Date