

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED

2007 APR 30 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04242007 Chg-LP CR2E003 (12/06)

4. FEI Number
13-3889971

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

DOCUMENT #B96000000187

1. Entity Name
VIDEO MONITORING SERVICES OF AMERICA, LIMITED PARTNERSHIP



Principal Place of Business
**1500 BROADWAY, 6TH FLOOR
NEW YORK, NY 10036**

Mailing Address
**1500 BROADWAY, 6TH FLOOR
NEW YORK, NY 10036**

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP	P11921 VIDEO MONITORING SERVICES OF AMERICA, INC. 330 WEST 42ND STREET NEW YORK, NY 10036	STREET ADDRESS CITY - ST - ZIP	1500 Broadway, 6th Floor New York, NY 10036
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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Peter Wengryn 4/24/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

STAPLE CHECK HERE