2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000001107

FLOHR, WILLIAM

355 22ND STREET

SANTA MONICA, CA 90402 US

Name: Address:

City-St-Zip:

Entity Name: INTERNATIONAL COMMERCIAL TELEVISION, INC.

FILED Jul 21, 2009 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:				
200 MADIS	SON AVENUI	E NODTH			•				
SUITE C	SON AVENU	ENORTH							
BAINBRID	GE ISLAND,	WA 98110	US						
Current Mailing Address:					New Mailing Address:				
299 MADISON AVENUE NORTH SUITE C					DEVON I TE 212	PARK DR	IVE		
	GE ISLAND,	WA 98110	US		YNE, PA	19087	US		
FEI Number:	: 76-0621102	FEI Numbe	er Applied For()	FEI Number I	Not Applica	ble ()	Certific	ate of Status Desired (X)	
Name and	l Address of	Current Reg	jistered Agent:	Nar	ne and A	ddress of	f New Reg	jistered Agent:	
SUITE#1	DIANNE TH OCEAN E D BEACH, FL								
	named entity e of Florida.	y submits this	statement for the p	urpose of cha	nging its	registered	d office or	registered agent, or both,	
SIGNATU	RE:								
Electronic Signature of Registered Agent								Date	
Election Car	npaign Financi	ng Trust Fund	Contribution ().						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	CLANEY, KEI 10245 SUNRI	() Delete LVIN ISE PLACE NE I ISLAND, WA 9	8110 US	Title: Nam Addr City-	e:		() Change	() Addition	
Title: Name: Address: City-St-Zip:	V (SCHEINER, F 66 SOLDIERS WAYNE, PA	S SQUARE		Title: Nam Addr City-	e:		()Change	() Addition	
Title: Name: Address: City-St-Zip:	REDEKOPP, 607-212 DAV	IE STREET	JMBIA, XX V6B5Z4 CA	Title: Nam Addr City-	e: R ess: 2	RANSOM, RI 640 WOOD	(X) Change ICHARD ILAND ROAI PA 19001 U)	
Title:	D () Delete		Title			() Change	() Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD SCHEINER V 07/21/2009