

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004766

Entity Name: SCREENING ONE, INC.

FILED
Jun 29, 2009
Secretary of State

Current Principal Place of Business:

2233 WEST 190TH STREET
TORRANCE, CA 90504

New Principal Place of Business:

Current Mailing Address:

2233 WEST 190TH STREET
TORRANCE, CA 90504

New Mailing Address:

FEI Number: 20-4067360

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NYRD, MICHAEL
9325 BAY PLAZA BLVD.
#208
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

BYRD, MICHAEL
9325 BAY PLAZA BLVD.
#208
TAMPA, FL 33619 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: MICHAEL BYRD

06/29/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: CHRM () Delete
Name: BRIGGS, MATTHEW L
Address: 2233 WEST 190TH STREET
City-St-Zip: TORRANCE, CA 90504

Title: VCHR () Delete
Name: BRIGGS, JEFFREY T
Address: 2233 WEST 190TH STREET
City-St-Zip: TORRANCE, CA 90504

Title: P () Delete
Name: BYRD, MICHAEL
Address: 9325 BAY PLAZA BLVD. #208
City-St-Zip: TAMPA, FL 33619

Title: V () Delete
Name: BRIGGS, MATTHEW L
Address: 2233 WEST 190TH STREET
City-St-Zip: TORRANCE, CA 90504

Title: ST () Delete
Name: BRIGGS, JEFFREY T
Address: 2233 WEST 190TH STREET
City-St-Zip: TORRANCE, CA 90504

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:

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: MATTHEW L BRIGGS

CHRM

06/29/2009

Electronic Signature of Signing Officer or Director

Date