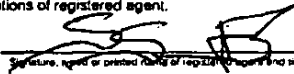
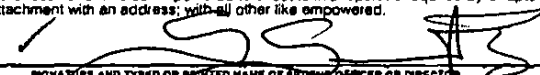


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 03, 2005 8:00 am
Secretary of State

06-03-2005 90396 001 ***450.00

DOCUMENT # H56600 1. Entity Name VIDEO ELECTRONICS & PARTS, INC.			
Principal Place of Business 5260 NW 167 STREET MIAMI LAKES, FL 33014		Mailing Address 5260 NW 167 STREET MIAMI LAKES, FL 33014	
DO NOT WRITE IN THIS SPACE		66021410  01112005 No Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent SMULEVICH, SAMI 5260 NW 167 STREET MIAMI LAKES, FL 33014		4. FEI Number 59-2527866	
		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
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.		DO NOT WRITE IN THIS SPACE	
SIGNATURE 		DATE 04-19-05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTS SMULEVICH, SAMMY 1781 NE 197 TERRACE NO MIAMI BEACH, FL 33179		
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
TITLE NAME STREET ADDRESS CITY - ST - ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.		SIGNATURE: 	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 05/31/05	