## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J91191

**Entity Name: SHALIMAR VIDEO CORPORATION** 

**FILED** Sep 25, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1193-B EGLIN PARKWAY NORTH 1193-B EGLIN PARKWAY NORTH SHALIMAR, FL 325798208

SHALIMAR, FL 325791252

**Current Mailing Address: New Mailing Address:** 

1193-B EGLIN PARKWAY NORTH 1193-B EGLIN PARKWAY NORTH SHALIMAR, FL 325798208 SHALIMAR, FL 325791252

FEI Number: 59-2848108 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HANSEN, CLIFFORD A PRES BRATCHER, PAUL H PRES 1193-B EGLIN PARKWAY NORTH 1193-B EGLÍN PARKWAY NORTH SHALIMAR, FL 32579 SHALIMAR, FL 325791252 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: PAUL H BRATCHER 09/25/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: (X) Change ( ) Addition

CLIFFORD A HANSEN, BRATCHER, PAUL H Name: Name: Address:

1193-B EGLIN PARKWAY NORTH 1193-B EGLIN PARKWAY NORTH Address:

City-St-Zip: SHALIMAR, FL 32579 City-St-Zip: SHALIMAR, FL 32579

Title: VPT () Delete Title: (X) Change ( ) Addition Name: HANSEN, ARLENE S Name: BRATCHER, SOLEDAD C

1193-B EGLIN PARKWAY NORTH Address: 1193-B EGLIN PARKWAY NORTH Address:

SHALIMAR, FL 32579 SHALIMAR, FL 32579 City-St-Zip: 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: PAUL H BRATCHER **PSD** 09/25/2007