2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K22810

Entity Name: TRANSVIDEO CORP.

FILED Apr 11, 2008 Secretary of State

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

10462 NW 31ST TERRACE DORAL, FL 33172 US

Current Mailing Address: New Mailing Address:

10462 NW 31ST TERRACE DORAL, FL 33172 US

FEI Number: 65-0047600 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:

ROBLES, NURIA S 10462 NW 31 TERRACE DORAL, FL 33172 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ROBLES, MARIO A DIRECTI Name: Name: ROBLES, MARIO A DIRECTI 10462 NW 31ST TERRAACE 10462 NW 31ST TERRAACE Address: Address: DORAL, FL 33172 City-St-Zip: DORAL, FL 33172 City-St-Zip:

Title: PO () Delete Title: P (X) Change () Addition
Name: ROBLES, NURIA S PRESIDE Name: ROBLES, NURIA S PRESIDE
Address: 10462 NW 31 TERRACE Address: 10462 NW 31 TERRACE

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 10462 NW 31 TERRACE

 City-St-Zip:
 DORAL, FL 33172
 City-St-Zip:
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Title: D () Delete Title: S (X) Change () Addition

 Name:
 ROBLES, ZASHA A
 Name:
 ROBLES, ZASHA A

 Address:
 10462 NW 31 TERRACE
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 10462 NW 31 TERRACE

 City-St-Zip:
 DORAL, FL 33172
 City-St-Zip:
 DORAL, FL 33172

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: NURIA S. ROBLES P 04/11/2008