

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K66577

FILED
Jun 30, 2005
Secretary of State

Entity Name: PALM AUDIO-VIDEO, INC.

Current Principal Place of Business:

PALM AUDIO VIDEO, INC ST 105A
12889 ERERALD COAST PKWY
DESTIN, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

PALM AUDIO VIDEO, INC ST 105A
12889 ERERALD COAST PKWY
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 59-2933078 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GARRISON, LAUREL
PALM AUDIO VIDEO, INC ST 105A
12889 EMERALD COAST PKWY
DESTIN, FL 32550 US

Name and Address of New Registered Agent:

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

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: D () Delete
Name: GARRISON, LAUREL
Address: 12889 EMERALD COAST PKWY ST 105 A
City-St-Zip: DESTIN, FL 32550

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LAUREL GARRISON

PRES

06/30/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date