2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# N06000005911

Entity Name: STOP TV INC

Current Principal Place of Business:

4117 W PALM AIRE DRIVE
B4
POMPANO BEACH, FL 33055

New Principal Place of Business:

Current Mailing Address:

18015 SW 29 CT
MIRAMAR, FL 33029

New Mailing Address:

FEI Number: 20-4965636 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ESPINDOLA, SILVANO
4117 W PALM AIRE DRIVE
B4
POMPANO BEACH, FL 33069 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

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	ESPINDOLA, SILVANO	
Address:	4117 W PALM AIRE DRIVE B4	
City-St-Zip:	POMPANO BEACH, FL 33069	
Title:	VP	( ) Delete
Name:	LARES, GUILLERMO	
Address:	PO BOX 4483	
City-St-Zip:	MIAMI, FL 33014	
Title:	S	( ) Delete
Name:	LARES, GUILLERMO	
Address:	PO BOX 4483	
City-St-Zip:	MIAMI, FL 33014	
Title:	T	( ) Delete
Name:	LARES, JORGE	
Address:	PO BOX 4483	
City-St-Zip:	MIAMI, FL 33014	
Title:	ST	( ) Delete
Name:	RAMIREZ, SADY	
Address:	PO BOX 4483	
City-St-Zip:	MIAMI, FL 33014	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JORGE LARES T 04/30/2008

Electronic Signature of Signing Officer or Director — Date