

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000098614

Entity Name: MVTV, INCORPORATED

FILED
Apr 21, 2003
Secretary of State

Current Principal Place of Business:

413 N.W. 15TH AVE., #3
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

413 N.W. 15TH AVE., #3
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 65-1053065

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, FREEMAN II
1339 NE 4TH AVE.
FT. LAUDERDALE, FL 33312 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CUNIGAN, VERNON
Address: 413 N.W. 15TH AVE., #3
City-St-Zip: FORT LAUDERDALE, FL 33311

Title: SD () Delete
Name: STEVENSON, VALERIE
Address: P.O. BOX 5411
City-St-Zip: LIGHTHOUSE PT., FL 33074

Title: TD () Delete
Name: JOHNSON, JACQUELYN
Address: 2720 SOMERSET DR., #W114
City-St-Zip: LAUDERDALE LAKES, FL 33312

Title: P () Delete
Name: TOWNSEND, JEFFREY
Address: 809 NW 10TH TERRACE, #1
City-St-Zip: FT. LAUDERDALE, FL 33311

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:

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: VERNON CUNIGAN

VP

04/21/2003

Electronic Signature of Signing Officer or Director

Date