2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 22, 2004
Secretary of State

DOCUMENT# P01000012762

Entity Name: CAPITAL A/V SYSTEMS INC.

Current Principal Place of Business:

182 GLADES ROAD
BOCA RATON, FL 33432

New Principal Place of Business:

6450 E ROGERS CIR
BOCA RATON, FL 33487

Current Mailing Address:

182 GLADES ROAD
BOCA RATON, FL 33432

New Mailing Address:

6450 E ROGERS CIR
BOCA RATON, FL 33487

FEI Number: 22-3779527 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUCKMAN, ALAN
182 GLADES ROAD
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

LUCKMAN, ALAN
6450 E ROGERS CIR
BOCA RATON, FL 33487 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: ALAN LUCKMAN 10/22/2004
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: VM ( ) Delete
Name: LOFTUS, MICHAEL
Address: 182 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33432

Title: P ( ) Delete
Name: LUCKMAN, ALAN
Address: 182 GLADES ROAD
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VM (X) Change ( ) Addition
Name: LOFTUS, MICHAEL
Address: 6450 E ROGERS CIR
City-St-Zip: BOCA RATON, FL 33487

Title: P (X) Change ( ) Addition
Name: LUCKMAN, ALAN
Address: 6450 E ROGERS CIR
City-St-Zip: BOCA RATON, FL 33487

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: MICHAEL LOFTUS VM 10/22/2004
Electronic Signature of Signing Officer or Director Date