

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000009590

Entity Name: SMOKERS VIDEO I, INC.

FILED
Oct 12, 2007
Secretary of State

Current Principal Place of Business:

3501 EMERSON STREET
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

POB 621147
OVIEDO, FL 327621147

New Mailing Address:

FEI Number: 27-0003766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURGIN, JAMES
11128 COLDFIELD DR
JACKSONVILLE, FL 32246 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: BURGIN, JAMES
Address: 11128 COLDFIELD DR
City-St-Zip: JACKSONVILLE, FL 32246

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D () Change (X) Addition
Name: BURRIS, GREGORY F
Address: 313 SOUTH CENTRAL AVE
City-St-Zip: OVIEDO, FL 32765

Title: D () Change (X) Addition
Name: BROWN, RONALD E JR
Address: 313 SOUTH CENTRAL AVE
City-St-Zip: OVIEDO, FL 32765

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: RONALD E BROWN, JR

D

10/12/2007

Electronic Signature of Signing Officer or Director

Date