2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000020268

Entity Name: PRO VIDEO SALES, INC.

FILED Mar 15, 2007 Secretary of State

| Current Princip | al Place of Business: | New Princip | al Place of Business |
|-----------------|-----------------------|-------------|----------------------|
| | | | |

6600 WEST ROGERS CIRCLE., SUITE 12 12501 NW 44TH STREET CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

6600 WEST ROGERS CIRCLE., SUITE 12 12501 NW 44TH STREET BOCA RATON, FL 33487 CORAL SPRINGS, FL 33065

FEI Number: 01-0610211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SICKLES, BARRY M ESQ 3300 UNIVERSITY DRIVE S#210 CORAL SPRINGS, FL 33065 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: EVANS, JON Name: EVANS, JON

 Name:
 EVANS, JON
 Name:
 EVANS, JON

 Address:
 6600 ROGERS CIRCLE #12
 Address:
 12501 NW 44TH STREET

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 EVANS, SHARON
 Name:
 EVANS, SHARON

 Address:
 6600 ROGERS CIRCLE #12
 Address:
 12501 NW 44TH STREET

 City-St-Zip:
 BOCA RATON, FL 33487
 City-St-Zip:
 CORAL SPRINGS, FL 33065

Title: D () Delete Title: D (X) Change () Addition

Name:ADELBERG, KENNETH JName:ADELBERG, KENNETH JAddress:6600 ROGERS CIRCLE #12Address:12501 NW 44TH STREETCity-St-Zip:BOCA RATON, FL 33487City-St-Zip:CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the 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: JON EVANS PD 03/15/2007