2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021945

Address:

City-St-Zip:

Entity Name: INTAVISION PRODUCTION CORP

9999 NE 2 ND AVENUE STE 218

MIAMI, FL 33138

FILED Aug 30, 2009 Secretary of State

Littly Nai	ile. IIVTAVISIC	IN FRODUCTION CORF.			
Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
1680 MICHIGAN AVE, STE 1022			1680 MICHIGAN AVE		
MIAMI BEA	ACH, FL 33139	US	1022 MIAMI BEACH, FL 3313	9 US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
9999 NE 2 ND AVENUE			1680 MICHIGAN AVE		
SUITE 218 MIAMI, FL			1022 MIAMI BEACH, FL 3313	9 US	
FEI Number:	04-3610901	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of I	Name and Address of New Registered Agent:	
CHIARATO, UGO V CPA 9999 NE 2 ND AVENUE SUITE 218 MIAMI, FL 33138 US			CHIARATO, UGO V CPA 1680 MICHIGAN AVE 1022 MIAMI, FL 33139 US	1022	
	named entity so e of Florida.	ubmits this statement for the pu	rpose of changing its registered o	office or registered agent, or both,	
SIGNATURE:				08/30/2009	
	Electroni	c Signature of Registered Ager	nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FERNANDEZ, JU	VENUE SUITE 218	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	FERNANDEZ, G	VENUE SUITE 218	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	SD () FERNANDEZ, SI	Delete EBASTIAN E	Title: (Name:) Change ()Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JULIAN FERNANDEZ PD 08/30/2009