

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000023779

**FILED**  
**May 28, 2008**  
**Secretary of State**

**Entity Name:** VANGUARD MULTIMEDIA CORPORATION

**Current Principal Place of Business:**

3619 ORANGEPOINTE RD  
VALRICO, FL 33594

**New Principal Place of Business:**

4131 SPRING WAY CIRCLE  
VALRICO, FL 33594

**Current Mailing Address:**

PO BOX 6205  
BRANDON, FL 33508

**New Mailing Address:**

**FEI Number:** 35-2123091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MERSHON, TANYA  
3619 ORANGEPOINTE RD  
VALRICO, FL 33594 US

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

MERSHON, ADAM  
4131 SPRING WAY CIRCLE  
VALRICO, FL 33594 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: ADAM MERSHON

05/28/2008

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: PD ( ) Delete  
Name: MERSHON, ADAM  
Address: 3619 ORANGEPOINTE RD  
City-St-Zip: VALRICO, FL 33594

Title: VSD (X) Delete  
Name: MERSHON, TANYA  
Address: 3619 ORANGEPOINTE RD  
City-St-Zip: VALRICO, FL 33594

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: MERSHON, ADAM  
Address: 4131 SPRING WAY CIRCLE  
City-St-Zip: VALRICO, FL 33594

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

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: ADAM MERSHON

PD

05/28/2008

Electronic Signature of Signing Officer or Director

Date