2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000043573

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FILED Apr 07, 2006 8:00 am Secretary of State

04-07-2006 90025 036 ***150.00

QUANTUM AUDIO VISUAL SOLUTIONS INC.											
Principal Place of Business 8511 SOUTHWEST 137 AVENUE MIAMI, FL 33183				Mailing Address 8511 SOUTHWEST 137 AVENUE MIAMI, FL 33183				- ''. Laana man asan asan asan as	EL MATTI DERRA 1110	14 8 511 1 8111 111	1001 H 10 X i
2. Principal Place of Business				Mailing Address							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			03162006	Chg-P	CR2E03	4 (11/05)	
City & State				City & State			4. FEI Numb 01-068			 	plied For t Applicable
Zip		Country		Zip Coun		stry	5. Certificate	of Status Desired		8.75 Add ee Required	
6. Name and Address of Current Registered Agent							7. Name and	Address of New R	legistered A	gent	
REZAI, SOHEIL S 8511 SOUTHWEST 137 AVENUE MIAMI, FL 33183						Name Street Address (P.O. Box Number is Not Acceptable)					
						City			FL	Zip Code	9
		ty submits this statemen stered agent.	for the p	ourpose of changing its	s register	ed office or reg	istered agent, or bo	oth, in the State of Fk	orida. I am Ia	amiliar with,	and accept
SIGNATURE_	Signature, type	d or printed name of registered ag	ent and title	if applicable. (NO	TE: Registere	 ad Agent signature rec	quired when reinstating)		DATÉ		
FIL After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 6 Fee will be \$55	0.00	9. Election Campa Trust Fund Con			\$5.00 May Be Added to Fees				
10.		OFFICERS AT	ND DIRE	CTORS	11.		ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTVS Delete REZAI, SOHEIL S 8511 SOUTHWEST 137 AVENUE MIAMI, FL 33183				į				Change	☐ Addition	
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12. I hereby indicated of the corchanged	certify that to the control on this repertation or on an arms.	he information supplied ort or supplemental repo the receiver or trustee en tachment with an addre	with this rt is true moowere ss, with e	filing does not qualify and accurate and that d to execute this report to ther like empowered	for the ex my signa rt as requ d.	cemptions conta ature shall have sired by Chapte	ained in Chapter 11 the same legal effer r 607, Florida Statut	9, Florida Statutes. ct as if made under les; and that my nam	I further certi oath; that I a ne appears in	ify that the in m an officer n Block 10 of	nformation or director r Block 11 if