

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000083459

**FILED**  
**Feb 24, 2005**  
**Secretary of State**

**Entity Name:** HOME THEATER TECHNICAL SERVICES, INC.

**Current Principal Place of Business:**

156 W. ROBERTSON STREET  
BRANDON, FL 33511

**New Principal Place of Business:**

101A MARGARET STREET  
BRANDON, FL 33511

**Current Mailing Address:**

156 W. ROBERTSON STREET  
BRANDON, FL 33511

**New Mailing Address:**

2810 ABBEY GROVE DRIVE  
VALRICO, FL 33594

FEI Number: 56-2284340

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LLANO, LUIS  
Address: 156 W. ROBERTSON STREET  
City-St-Zip: BRANDON, FL 33511

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

Title: PD (X) Change ( ) Addition  
Name: LLANO, LUIS  
Address: 2810 ABBEY GROVE DRIVE  
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LUIS LLANO

PD

02/24/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date