2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000096508

Entity Name: 2VHL PROMOTIONS, INC.

FILED Apr 11, 2009 Secretary of State

Current Mailing Address: Sa11 BURTS RD. TAMPA, FL 33619 Current Mailing Address: New Mailing Address: Sa11 BURTS RD. TAMPA, FL 33619 FEI Number: 30-0108696 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: VARNADORE, AL 8759 BARCIN CIRCLE RIVERVIEW, FL 33569 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or bein 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 DIRECTIBLE () Change () Addition Name: VARNADORE, AL Name: Address: 010y-St-Zip: RIVERVIEW, FL 33599 City-St-Zip: Title: () Change () Addition Name: HUTTO, TODD Name: VARNADORE, DEAN NAME:	Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
Sal1 BURTS RD. TAMPA, FL 33619 FEI Number: 30-0108696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: WARNADORE, AL BRYSE BARCIN CIRCLE RIVERVIEW, FL 33569 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or being the state of Florida. SIGNATURE: Electronic Signature of Registered Agent Date				-		
TAMPA, FL 33619 FEI Number: 30-0108696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: WARNADORE, AL S759 BARCIN CIRCLE RIVERVIEW, FL 33569 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or beautiful to the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Fittle: PD () Delete Title: () Change () Addition Name: Address: 8759 BARCIN CIRCLE Address: City-St-Zip: City-St-Zip: GIBSONTON, FL 33594 City-St-Zip: GIBSONTON, FL 33594 City-St-Zip: GIBSONTON, FL 33594 City-St-Zip: GIBSONTON, FL 33594 City-St-Zip: GIBSONTON, FL 33527 City-St-Zip: DOVER, FL 33527 City-St-Zip: DIVERS CITY City-St-Zip: Title: D () Delete Title: () Change () Addition Name: Address: City-St-Zip: DOVER, FL 33527 City-St-Zip: DOVER, FL 33527 City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: DOVER, FL 33527 City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: DOVER, FL 33527 City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: DOVER, FL 33527 City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: DOVER, FL 33527 City-St-Zip: Title: () Change () Addition Name: Address: Addr	Current M	lailing Address	: :	New Mailing Address	s:	
Name and Address of Current Registered Agent: VARNADORE, AL 8759 BARCIN CIRCLE RIVERVIEW, FL 33569 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or be in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent						
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In the State of Florida. SIGNATURE:	8759 BAR	CIN CIRCLE	US			
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Name: HUTTO, TODD Name: Address: 10015 PREVATT ST. Address: City-St-Zip: GIBSONTON, FL 33534 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: VARNADORE, DEAN Name: Address: 3216 S FORBES RD Address: City-St-Zip: DOVER, FL 33527 City-St-Zip: Title: D () Delete Title: () Change () Addition Name: DEZARN, MIKE Name: Address: 6311 BURTS RD Address:	Title: Name: Address:	PD () I VARNADORE, AI 8759 BARCIN CI	Delete L RCLE	Title: Name: Address:		
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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: AL VARNADORE PD 04/11/2009