

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 24, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000103948**  
1. Entity Name  
**INTERBAN VIDEO PRODUCTIONS, CORP.**



Principal Place of Business  
**1711 W 38 PLACE - STE 1205  
HIALEAH, FL 33012**

Mailing Address  
**1711 W 38 PLACE - STE 1205  
HIALEAH, FL 33012**

**DO NOT WRITE IN THIS SPACE**



07202006 No Chg-P CR2E034 (11/05)

|   |                                       |
|---|---------------------------------------|
| 4. FEI Number<br><b>NOT APPLICABLE</b>                    | Applied For<br>Not Applicable         |
| 5. Certificate of Status Desired <input type="checkbox"/> | <b>\$8.75</b> Additional Fee Required |

6. Name and Address of Current Registered Agent

**PROIA, DORALICE C  
1711 W 38 PLACE - STE 1205  
HIALEAH, FL 33012**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 6, 2006**

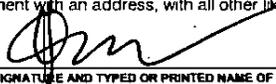
9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

000000571871  
07/25/06-80006-020.550.00

| 10. OFFICERS AND DIRECTORS                     |  |
|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P<br/>PROIA, DORALICE C<br/>1711 W 38 PLACE - STE 1205<br/>HIALEAH, FL 33012</b>  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VP<br/>DA SILVA, ALLAN A<br/>1711 W 38 PLACE - STE 1205<br/>HIALEAH, FL 33012</b> |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D<br/>EVANS, JOHN<br/>1711 W 38 PLACE - STE 1205<br/>HIALEAH, FL 33012</b>        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  |

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **DORALICE C. PROIA**  **7/21/06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #