2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P04000105058

1. Entity Name

ADVANCE AUDIO & VIDEO SYSTEMS, INC.



FILED Mar 13, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

929 MARINA DRIVE

PANAMA CITY BEACH, FL 32408

929 MARINA DRIVE

PANAMA CITY BEACH, FL 32408



03082007

No Chg-P

CR2E034 (11/05)

4. FEI Number 34-2007952

Applied For Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6.	Name	and	Address	of	Current	Reg	dstered	Agent

MCLNTUFF, STEVEN J 929 MARINA DRIVE PANAMA CITY BEACH, FL 32408

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				•••	THE GIAGE
	named entity submits this statement for the pilons of registered agent.	urpose of changing its registere	d office or r	egistered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE: Registered	Agent signatur	e required when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		_	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCINTURFF, STEVEN J 409 VENETIAN WAY PANAMA CITY, FL 32405				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAYLES, JAMES G 929 MARINA DRIVE PANAMA CITY BEACH, FL 32408				00000665040 03/23/07-80008-019 158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE		<u>, c</u>			

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:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

STEVE MCINTURFF 3-8-5

Daytime Phone #